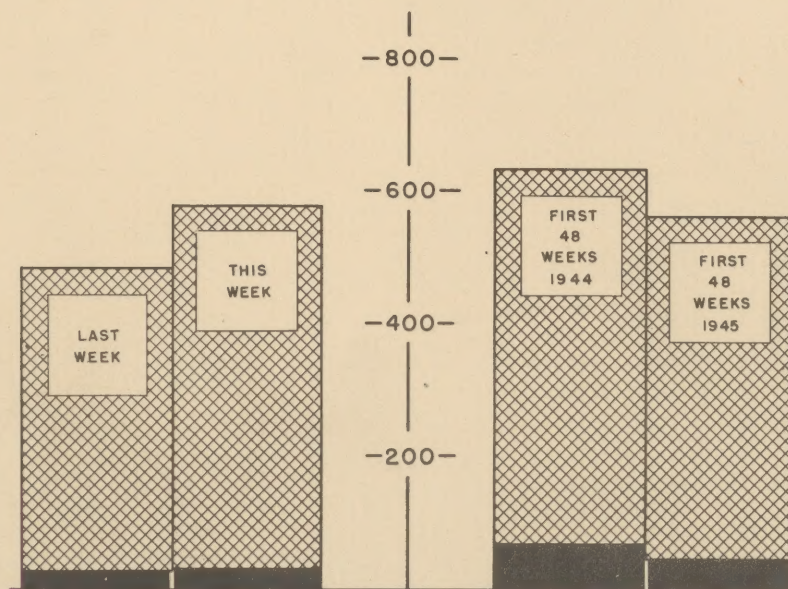




WEEKLY HEALTH REPORT

CURRENT MORBIDITY DATA FOR THE ARMY IN THE CONTINENTAL UNITED STATES

WEEK ENDING 30 NOVEMBER 1945



ANNUAL MORBIDITY RATE FROM ALL CAUSES COMBINED
PER 1000 STRENGTH

DISEASE



INJURY



ARMY
MEDICAL
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SPECIAL SECTION
ONMORBIDITY & MORTALITY
1819 - 1944

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WEEKLY HEALTH REPORT

CONTENTS

DATA FOR WEEK ENDING 30 NOVEMBER 1945

	PAGE
NATURE OF THE DATA	2
COMMENT ON CURRENT TRENDS	5
SUMMARY FOR TOTAL UNITED STATES AND THE SERVICE COMMANDS	10
MORBIDITY DATA FOR INDIVIDUAL STATIONS (OTHER THAN GENERAL HOSPITALS) HAVING A STRENGTH OF 5000 OR OVER	12
STATIONS WITH HIGHEST MORBIDITY RATES	21
CASES OF DISEASES WHICH ARE OF SPECIAL INTEREST	22

MORBIDITY AND MORTALITY, 1819-1944

MORBIDITY AND MORTALITY, U. S. ARMY, 1819-1944	23
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WEEKLY HEALTH REPORT

NATURE OF THE DATA

The data presented here are taken from the Statistical Health Reports, WD AGO 8-122, rendered weekly to the Office of The Surgeon General by every hospital and separate dispensary in the continental United States. Troops in transit and certain small detachments are not required to submit reports; for this and other reasons, total strength of reporting units has been consistently about 1 percent below the actual strength of the Army in this country. The mean strength shown for individual stations is that of Army personnel attached or assigned for medical care and does not include organizations not on the post but dependent on the station for hospitalization.

Because of the desirability of placing the information in circulation at the earliest possible time following its receipt, figures are in general shown herein as reported. Where there is some doubt as to the accuracy of the reported figures, their verification is requested, and the fact that they have been so questioned is indicated by the symbol (1).

MORBIDITY DATA

Admissions are reported only for cases admitted to a medical installation (either to hospital or quarters) and not returned to duty within the same day, except for certain cases carded for record only (chiefly venereal disease cases treated on a duty status, and deaths which occurred before admission to hospital or quarters). Admissions designated as "injury" comprise all "new" traumatisms (i.e., morbid conditions due to external causes, including poisons taken internally, results of exposure to heat, cold and light, as well as various types of wounds not due to enemy action) other than battle casualties. Under present conditions there would not be any direct admissions in the continental United States properly classifiable as battle casualties. All cases other than those of injury or battle casualty are classified as "disease."

Admission rates are shown for all causes combined, for all diseases combined, for injuries and for a few specific diseases. These rates are presented on an annual basis to facilitate comparisons with corresponding rates in annual and monthly reports. Such annual rates of admission indicate the number of admissions per thousand mean strength which would occur over a year's time if the current week's experience continued for a year.

The report also shows the number of cases of the more common communicable and certain other diseases of special interest. It may be noted that under the term infectious hepatitis are included cases reported as jaundice and cholangitis. Appended is a list of cases reported for the rarer communicable and certain other diseases.

The average proportion of the daily strength of the command which is confined to hospital or quarters (mean number of non-effectives per thousand strength) is given in the summary table for the total United States and for each of the Service Commands. More significant is the estimated non-effective rate for personnel stationed in the United States shown in the chart on page 7.

The number of enlisted men discharged during the week on Certificates of Disability for Discharge (CDD) are shown for individual stations. These data should be distinguished from the figures for "honorable discharges for physical and mental disqualification" assembled by The Adjutant General's Office; the latter include discharges for inaptness in addition to CDD's and are tabulated on a somewhat different basis (e.g., the April data represent April discharges processed by the AGO during April and May plus discharges prior to April which were processed in May).

In making comparisons between Service Commands it should be borne in mind that morbidity rates naturally tend to be higher in those Service Commands which have a relatively large number of General Hospitals and Ports of Embarkation. The presence of sizeable numbers of troops not under the jurisdiction of a Service Command (e.g. casualties, task force troops, etc.) affects the interpretation of the data from the viewpoint of Command responsibility.

MORTALITY DATA

Recent studies indicate that the reporting of deaths on WD AGO 8-122 is incomplete, especially in the case of deaths from injury. The resulting understatement in the mortality rate from injury may be as much as 10 percent and occasionally even more, but the death rate from disease is not materially understated. Therefore in computing mortality rates from injury and from all causes on the basis of the corresponding numbers of deaths, as shown in this report, an appropriate adjustment for the underreporting of such deaths must be made.

STATIONS WITH HIGHEST MORBIDITY RATES

Included in the report is a table listing the stations (having strength of 5000 or over) with the highest morbidity rates from all causes, from all diseases combined, from injuries, and from a few specific diseases. Not infrequently, the excessively high rates of admission for all causes and for all diseases combined reported from reception centers reflect a large number of venereal disease cases among newly inducted men. Therefore, more significant of high morbidity from disease are the rates of admission for disease excluding venereal infections existing prior to induction, which rates are also shown in the table. It should also be noted that reception, redistribution, and separation centers frequently report relatively large numbers of admissions arising from routine physical examinations of large bodies of troops.

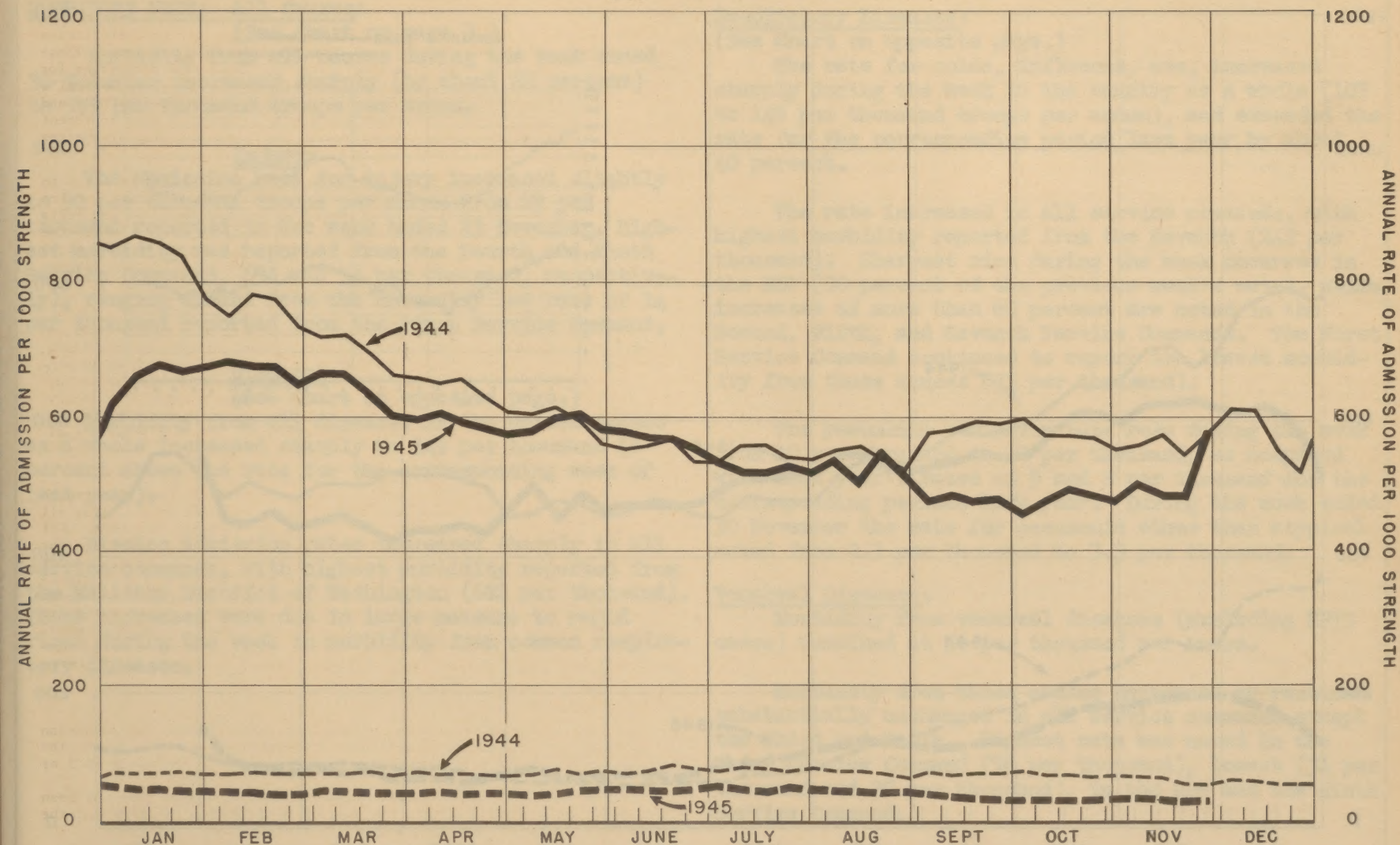
EXPLANATORY MATTER

In reading the detail tables, it should be born in mind that admission rates based on small numbers of cases are not reliable. For this reason the symbol (?) is placed after admission rates computed on the basis of 5 or fewer cases.

Where the current week's data for a particular station have not been received, the latest available figures are substituted therefor and the symbol (#) is placed after the name of the station.

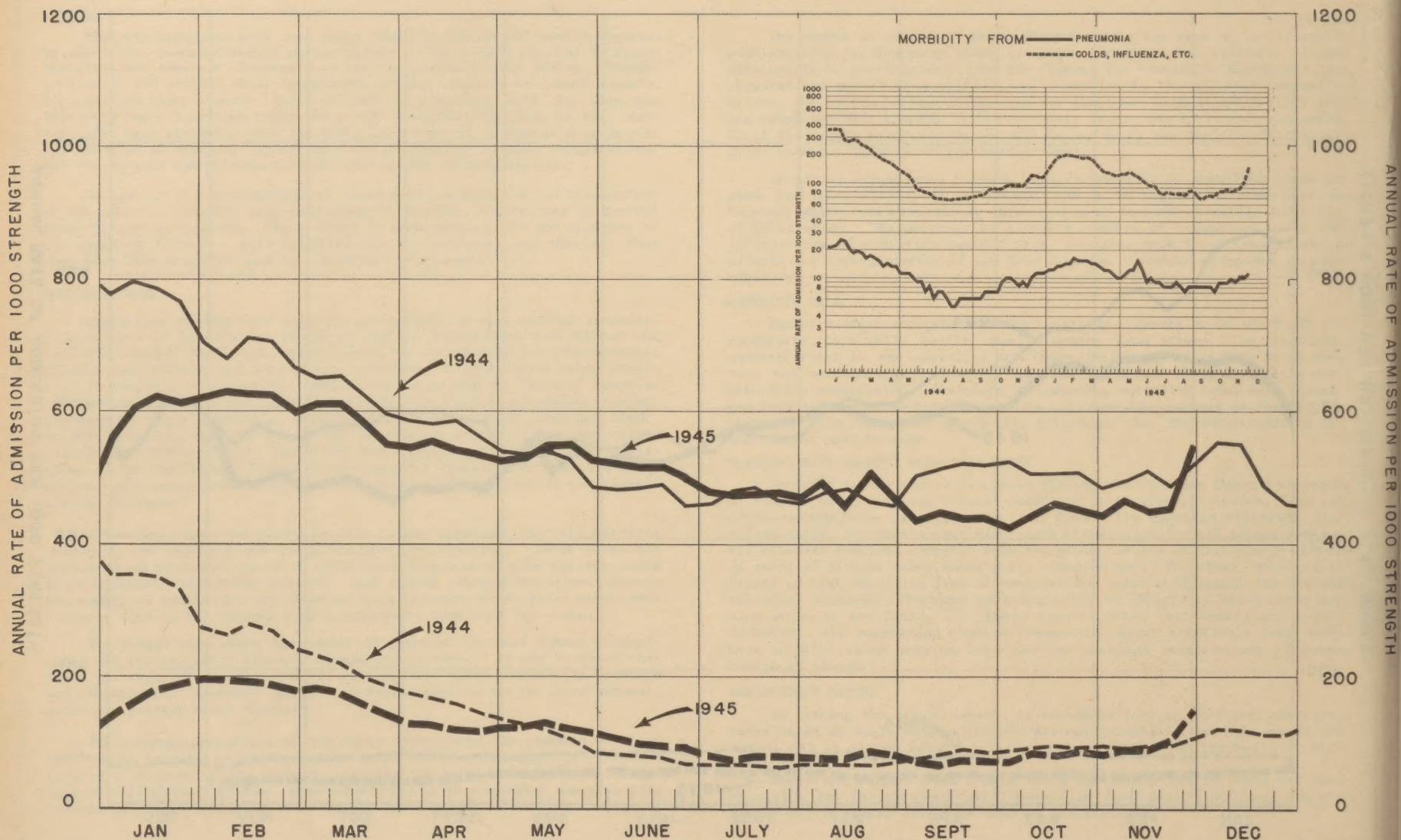
MORBIDITY FROM ALL CAUSES INJURY ONLY

CONTINENTAL UNITED STATES



MORBIDITY FROM DISEASE ONLY COLDS, INFLUENZA, ETC.

CONTINENTAL UNITED STATES



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OFFICE OF THE SURGEON GENERAL
MEDICAL STATISTICS DIVISION
HEALTH REPORTS BRANCH

COMMENT ON CURRENT TRENDS

MORBIDITY FROM: All Causes:

(See Chart on page 3.)

Morbidity from all causes during the week ended 30 November increased sharply (by about 20 percent) to 579 per thousand troops per annum.

Injury:

The admission rate for injury increased slightly to 30 per thousand troops per annum from 29 per thousand reported in the week ended 23 November. Highest morbidity was reported from the Fourth and Ninth Service Commands, (35 and 34 per thousand, respectively), ranging upward from the unusually low rate of 14 per thousand reported from the First Service Command.

Diseases:

(See Chart on opposite page.)

Morbidity from all diseases in the United States as a whole increased sharply to 549 per thousand (5 percent above the rate for the corresponding week of last year).

Disease admission rates increased sharply in all service commands, with highest morbidity reported from the Military District of Washington (682 per thousand). These increases were due in large measure to rapid rises during the week in morbidity from common respiratory diseases.

Respiratory Diseases:

(See Chart on opposite page.)

The rate for colds, influenza, etc, increased sharply during the week in the country as a whole (103 to 149 per thousand troops per annum), and exceeded the rate for the corresponding period last year by about 40 percent.

The rate increased in all service commands, with highest morbidity reported from the Seventh (242 per thousand). Sharpest rise during the week occurred in the MDW (90 percent of the previous week's rate), while increases of more than 60 percent are noted in the Second, Fifth, and Seventh Service Commands. The First Service Command continued to report the lowest morbidity from these causes (91 per thousand).

The pneumonia admission rate rose during the week from 10 per thousand to 12 per thousand, as compared with last year's rates of 9 and 8 per thousand for the corresponding periods last year. During the week ended 30 November the rate for pneumonia other than atypical moved from 2.3 per thousand to 3.3 per thousand.

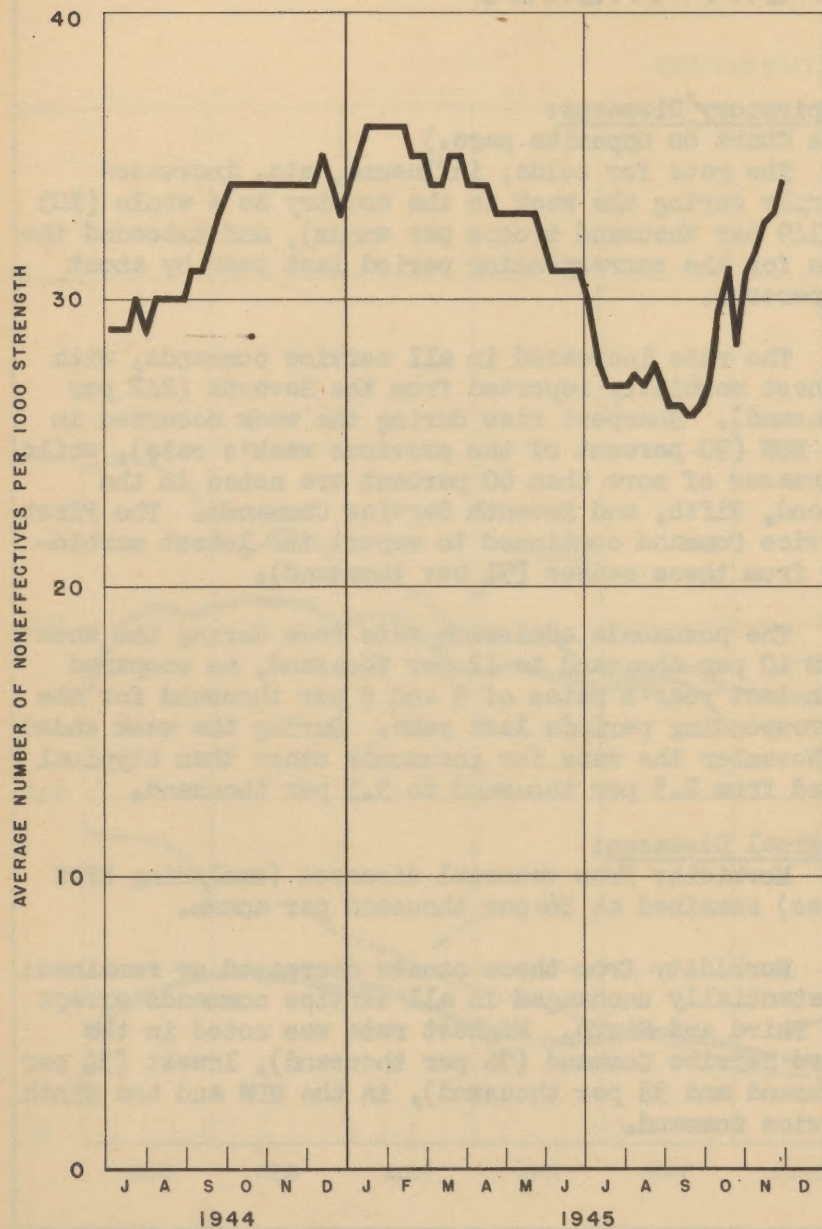
Venereal Diseases:

Morbidity from venereal diseases (excluding EPTS cases) remained at 56 per thousand per annum.

Morbidity from these causes decreased or remained substantially unchanged in all service commands except the Third and Sixth. Highest rate was noted in the Third Service Command (76 per thousand), lowest (34 per thousand and 38 per thousand), in the MDW and the Ninth Service Command.

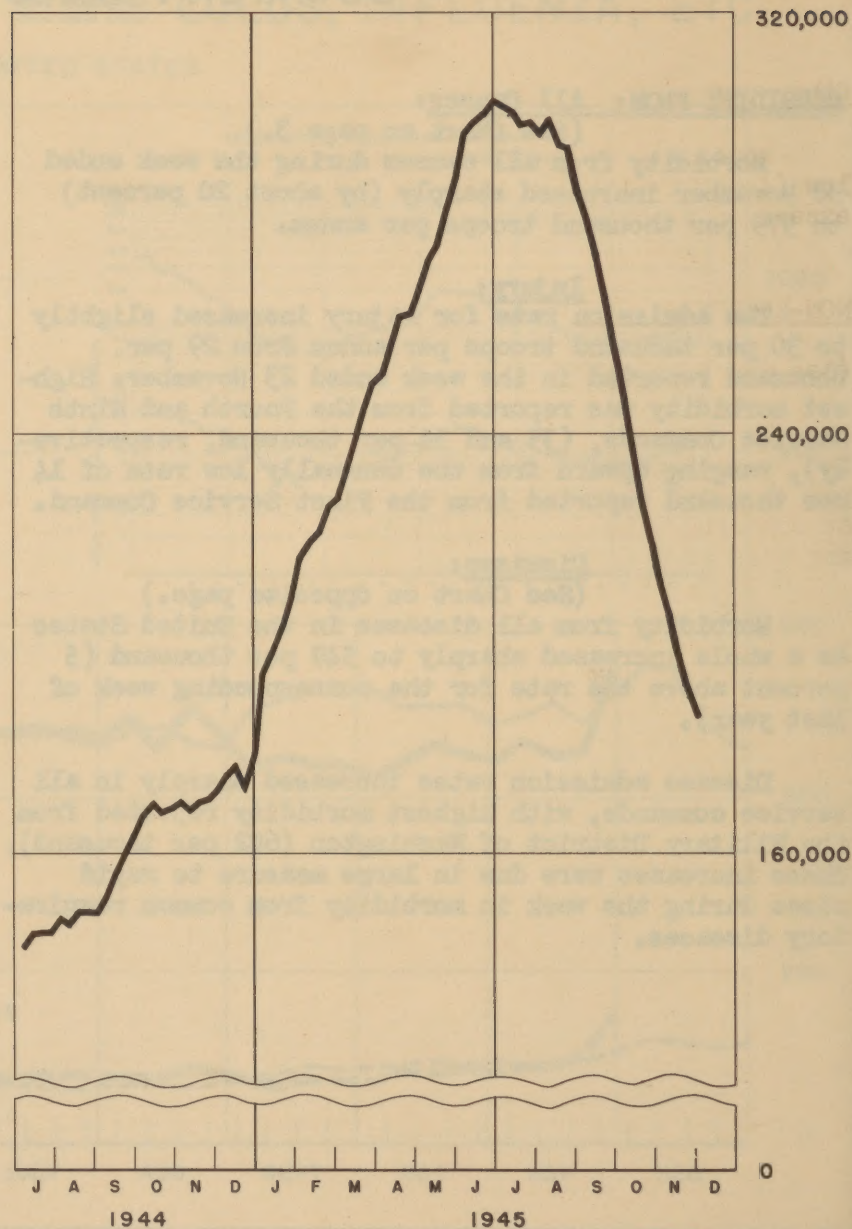
NONEFFECTIVE RATE

CONTINENTAL UNITED STATES



PATIENTS REMAINING IN HOSPITAL

CONTINENTAL UNITED STATES



COMMENT ON CURRENT TRENDS (CONT'D)

Other Communicable Diseases:

Morbidity from diarrhea and dysentery remained low (4 per thousand); only the MDW reported a rate in excess of 5 per thousand.

NON-EFFECTIVE RATE:

(See Chart on page 6.)

The non-effective rate for personnel stationed in the continental United States is estimated at 34.1 per thousand strength for the week ended 30 November as compared with 34.0 per thousand for the corresponding week of 1944.

PATIENTS REMAINING UNDER TREATMENT: 30 NOVEMBER 1945:
(See Chart on page 6.)

The number of patients remaining in hospital in the Zone of Interior, including patients transferred from overseas, decreased during the week to 186,585 as compared with 191,207 at the end of the previous week.

The number of neuropsychiatric cases remaining was 14,021 or about 800 fewer than at the end of the previous week. Non-battle injury patients remaining numbered about 31,000. The number of battle casualty patients remaining decreased by about 2400 to number 50,395.

CERTIFICATES OF DISABILITY FOR DISCHARGE:
(See Chart on page 9.)

In the week ended 30 November there were 6,625 enlisted personnel discharged by CDD, (about 1000 fewer than in the previous week). Fifty-four percent of these discharges were reported by general hospitals and 26 percent by convalescent hospitals. Among these CDD's were 1307 neuropsychiatric cases, about 200 less than in the previous week.

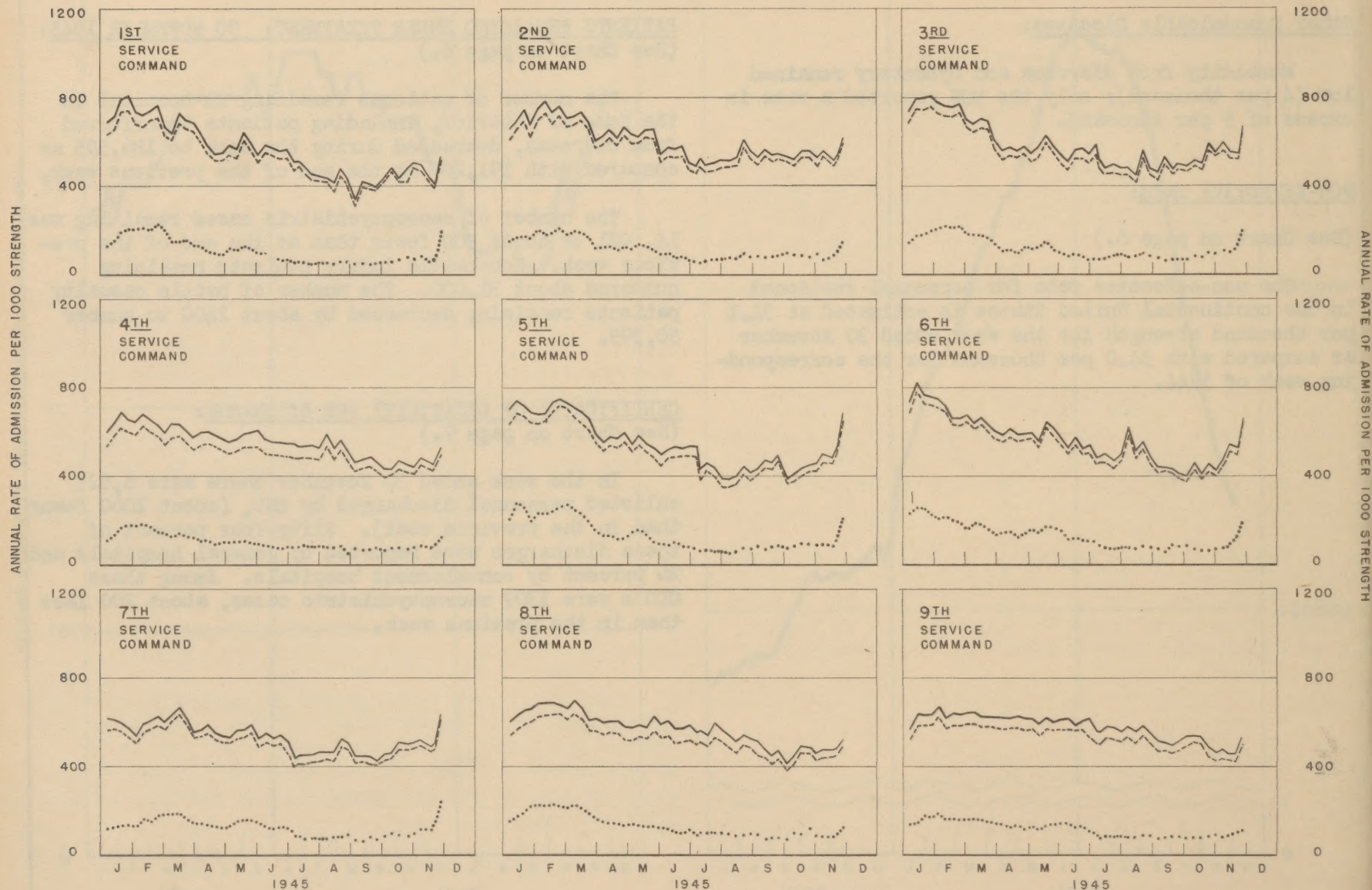
MORBIDITY FROM

ALL CAUSES

DISEASE ONLY

COLDS, INFLUENZA, ETC.

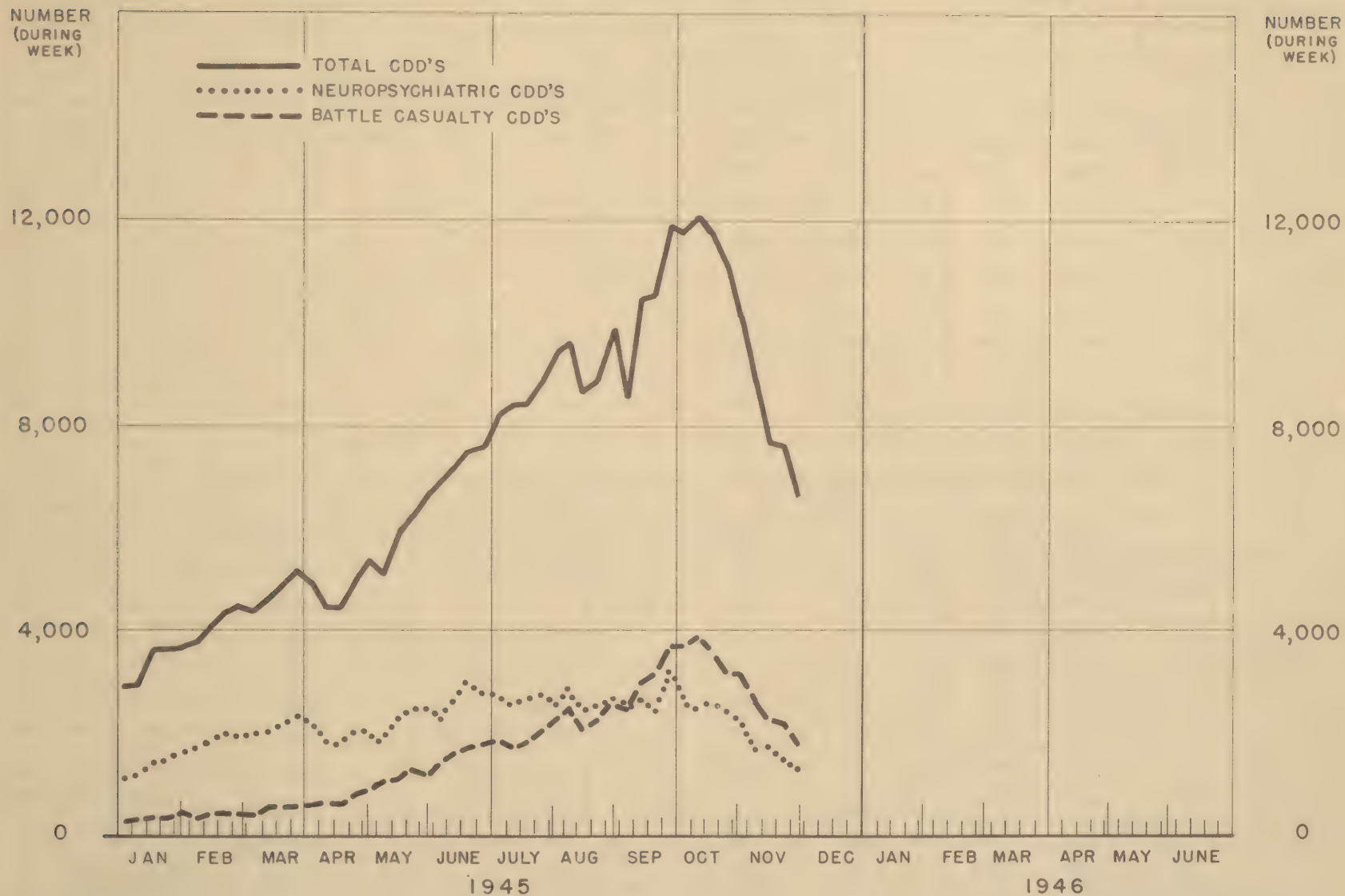
VARIATIONS BY SERVICE COMMAND
CONTINENTAL UNITED STATES



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CERTIFICATES OF DISABILITY FOR DISCHARGE

CONTINENTAL UNITED STATES



WEEKLY HEALTH REPORT

SUMMARY FOR TOTAL UNITED STATES AND THE SERVICE COMMANDS

RESTRICTED

SERVICE COMMAND	MEAN STRENGTH	A D M I S S I O N S																MEAN NUMBER OF NONEFFECTIVES PER 1000 STRENGTH	
		ANNUAL RATE PER 1000 STRENGTH						ANNUAL CASE RATE PER 1000 STRENGTH											
		ALL CAUSES		DISEASE		INJURY		COLDS, INFLU- ENZA, ETC. *		PNEUMONIA (INCL. ATYPICAL)		DIARRHEA AND DYSENTERY		VENEREAL (EXCL. EPTI)					
C U R R E N T W E E K C O M P A R E D W I T H P R E V I O U S W E E K																			
	Current Week	Previous Week	Current Week	Previous Week	Current Week	Previous Week	Current Week	Previous Week	Current Week	Previous Week	Current Week	Previous Week	Current Week	Previous Week	Current Week	Previous Week	Current Week	Previous Week	
TOTAL UNITED STATES	2434855	2480313	579	484	549	455	30	29	149	103	12	10	4	3	56	56	34	33	
FIRST SERVICE COMMAND	92606	88660	527	405	513	378	14	27	91	70	7	7	4	2 ?	48	48	41	28	
SECOND SERVICE COMMAND	192847	183325	617	541	593	520	24	21	144	81	13	12	2	6	54	65	37	38	
THIRD SERVICE COMMAND	194127	198262	670	544	647	520	23	24	196	126	11	7	5	1 ?	76	69	40	37	
MIL. DIST. OF WASHINGTON	55001	56184	713	461	682	441	31	20	234	123	17	12	11	5 ?	34	35	39	38	
FOURTH SERVICE COMMAND	502125	525257	528	449	493	417	35	32	121	88	15	11	3	4	69	69	30	30	
FIFTH SERVICE COMMAND	150634	159882	688	538	658	513	30	25	204	125	8	3 ?	3	2 ?	67	64	36	31	
SIXTH SERVICE COMMAND	141616	141894	664	524	643	498	21	26	187	121	10	6	3	1 ?	53	42	37	35	
SEVENTH SERVICE COMMAND	231133	241128	638	506	611	478	27	28	242	150	11	11	2	3	54	58	31	29	
EIGHTH SERVICE COMMAND	421792	438205	522	478	491	447	31	31	117	95	13	13	4	2	52	55	35	34	
NINTH SERVICE COMMAND	452974	447516	531	459	497	423	34	36	115	91	9	8	5	5	38	37	32	34	
C U R R E N T Y E A R T O D A T E C O M P A R E D W I T H C O R R E S P O N D I N G P E R I O D P R E V I O U S Y E A R																			
	Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year	Current Year	Previous Year	
TOTAL UNITED STATES	3037916	4081011	561	634	517	566	44	68	114	149	11	12	6	9	49	33	84	40	
FIRST SERVICE COMMAND	92026	108182	543	621	509	563	34	58	94	159	6	10	7	8	43	35	148	41	
SECOND SERVICE COMMAND	200866	215647	596	730	560	671	36	59	107	194	9	11	6	9	48	43	115	50	
THIRD SERVICE COMMAND	201290	260499	581	695	547	633	34	62	113	180	10	14	5	7	66	36	103	43	
MIL. DIST. OF WASHINGTON	54536	61117	582	672	547	628	35	44	138	162	10	16	6	4	25	15	73	70	
FOURTH SERVICE COMMAND	715475	1095110	555	623	503	550	52	73	100	126	12	11	7	11	55	33	72	35	
FIFTH SERVICE COMMAND	162836	188598	530	654	492	588	38	66	120	157	11	12	7	12	56	47	153	62	
SIXTH SERVICE COMMAND	140793	163754	546	688	515	632	31	56	114	195	11	20	4	4	50	38	120	45	
SEVENTH SERVICE COMMAND	292716	386478	526	686	490	623	36	63	116	202	8	19	4	9	50	30	82	40	
EIGHTH SERVICE COMMAND	666176	937206	570	581	519	509	51	72	131	123	14	10	7	9	43	31	61	34	
NINTH SERVICE COMMAND	511202	664420	575	623	528	553	47	70	112	148	7	8	6	7	40	28	72	41	

FORM SG-396B REVISED 13 NOVEMBER 1943

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*Includes Acute Bronchitis, Acute Rhinitis, Coryza, Acute Tonsillitis, Acute Pharyngitis, Acute Nasopharyngitis, Acute Laryngitis, and Influenza.

WEEKLY HEALTH REPORT

RESTRICTED

VOLUME V REPORT NO. 48
WEEK ENDING 30 November 1945

SUMMARY FOR TOTAL UNITED STATES AND THE SERVICE COMMANDS

SERVICE COMMAND	MEAN STRENGTH*	A D M I S S I O N S NUMBER OF CASES												NUMBER OF DEATHS				NUMBER OF DISPOSITIONS BY CDD
		MEASLES	MUMPS	SCARLET FEVER	M'COCCIC MENINGITIS	RHEUMATIC FEVER	ATYPICAL PNEUMONIA	INFECTIOUS HEPATITIS	MALARIA ACQUIRED		TUBERCULOSIS	STREPTO- COCCAL SORE THROAT	SCABIES	ALL CAUSES	DISEASE	INJURY	BATTLE CASUALTY	
									IN USA	OUT OF USA								
C U R R E N T W E E K																		
TOTAL UNITED STATES	2434855	20	91	25	9	28	391	179	3	373	147	74	618	74	32	37	5	6625
FIRST SERVICE COMMAND	92606		4	1		1	9	11		10	9	2	9	1		1		380
SECOND SERVICE COMMAND	192847	1	2	1		2	33	19		49	7		45	6	3	2	1	690
THIRD SERVICE COMMAND	194127	2	16	3			19	16	1	23	3	7	96	3	2		1	697
MIL. DIST. OF WASHINGTON	55001	1	1			1	10	3		2	2		8	3	3			106
FOURTH SERVICE COMMAND	502125	1	18	5	2	3	117	33	1	29	25		89	14	4	7	3	1165
FIFTH SERVICE COMMAND	150634	1	2	1	1	2	18	8		35	10	6	58	3	1	2		573
SIXTH SERVICE COMMAND	141616		7		1		14	24		49	34		74	4	2	2		440
SEVENTH SERVICE COMMAND	231133	4	11	6	3	7	35	12		30	16	30	63	11	7	4		901
EIGHTH SERVICE COMMAND	421792	4	19	7	2	7	83	23	1	73	28	18	75	12	4	8		898
NINTH SERVICE COMMAND	452974	6	11	1		5	53	30		73	13	11	101	17	6	11		775
P R E V I O U S W E E K																		
TOTAL UNITED STATES	2480313	9	64	14	9	26	350	154	2	323	158	29	504	83	45	35	3	7646
FIRST SERVICE COMMAND	88660		1			1	8	7		7	3	2	14	4	2	2		382
SECOND SERVICE COMMAND	183325	1	4	1		1	27	26		33	13		24	9	5	4		984
THIRD SERVICE COMMAND	198262	1	7	2	1	3	18	22		24	8	5	92	4	1	2	1	703
MIL. DIST. OF WASHINGTON	56184			1			6	2		8			6	6	6			108
FOURTH SERVICE COMMAND	825257		14	3	4	4	96	13	1	45	21	5	90	18	8	9	1	1116
FIFTH SERVICE COMMAND	159882		4	2			7	8		27	8	2	46	2	1	1		721
SIXTH SERVICE COMMAND	141894		1		1	2	15	25		22	11		58	5	4	1		541
SEVENTH SERVICE COMMAND	241128	1	11	1	3	2	44	7	1	25	26	10	59	11	8	3		1148
EIGHTH SERVICE COMMAND	438205	3	8	3		5	84	26		44	38	4	39	13	5	7	1	960
NINTH SERVICE COMMAND	447516	3	14	1		8	45	18		88	30	1	76	11	5	6		983

FORM SG-396C REVISED 2 DEC. 1944

* SEE NATURE OF THE DATA, PAGE 2

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ARMY SERVICE FORCES
OFFICE OF THE SURGEON GENERAL
MEDICAL STATISTICS DIVISION
HEALTH REPORTS BRANCH

WEEKLY HEALTH REPORT

INDIVIDUAL STATIONS

RESTRICTED

SERVICE COMMAND AND STATION	MEAN STRENGTH**	A D M I S S I O N S														NUMBER OF DEATHS			NUMBER OF DISPOSITIONS BY CODE
		ANNUAL RATE PER 1000 STRENGTH			ANNUAL CASE RATE PER 1000 STRENGTH*				NUMBER OF CASES										
		ALL CAUSES	DISEASE	INJURY	COLD, INFLUENZA, ETC.,	PNEUMONIA (INCLUDING ATYPICAL)	DIARRHEA AND DYSENTERY	VENEREAL* (EXCLUDING EPTS)	MEASLES	MUMPS	SCARLET FEVER	M'COCCIC MENINGITIS	RHEUMATIC FEVER	ATYPICAL PNEUMONIA	INFECTIOUS HEPATITIS	ALL CAUSES	DISEASE	INJURY	
FIRST SERVICE COMMAND	92606	527	513	14	91	7	4	48		4	1		1	9	11	1		1	380
Boston PoE, Mass	20602	346	321	25	53	37		86							3				1
Devens, Ft, Mass	30917	515	515		56	37	27	19		1	1			2					
Westover Field, Mass (RH)	6826	381	351	307	387	237		307		1			1	2					4
TOTAL: ALL STATIONS UNDER 5000 STR & MISC UNITS	34261	677	660	17	156	9	11	56		2				5	8	1		1	375
SECOND SERVICE COMMAND	192847	617	593	24	144	13	2	54	1	2	1		2	33	19	6	3	2	690
Dix, Ft, N J	53539	570	565	57	77	8	27	45	1					8	1				11
Hancock, Ft, N J	5395	839	800	397	357	197		68						1					
Kilmer, Cp, N J	23473	461	423	38	71	77		135		1			1	3	3	1	1		4
Mitchel Field, N Y (RH)	7400	710	696	147	287	217		105						3					9
Monmouth, Ft, N J (RH)	16600	511	511		56	37		19							2				20
Shanks, Cp, N Y	12477	796	775	217	117	137		79		1	1			2	1	1	1		9
TOTAL: ALL STATIONS UNDER 5000 STR & MISC UNITS	79963	669	630	39	236	20	37	32					1	16	12	4	1	2	637

FORM SG-945 11 DEC. 1944

* DOES NOT INCLUDE READMITTED CASES (I.E. CASES PREVIOUSLY REPORTED BY AN ARMY UNIT)
** SEE NATURE OF THE DATA, PAGE 2.

RESTRICTED

ARMY SERVICE FORCES
OFFICE OF THE SURGEON GENERAL
MEDICAL STATISTICS DIVISION
HEALTH REPORTS BRANCH

WEEKLY HEALTH REPORT

INDIVIDUAL STATIONS

RESTRICTED

SERVICE COMMAND AND STATION	MEAN STRENGTH**	A D M I S S I O N S														NUMBER OF DEATHS			NUMBER OF DISPOSITIONS BY CDD
		ANNUAL RATE PER 1000 STRENGTH			ANNUAL CASE RATE PER 1000 STRENGTH					NUMBER OF CASES									
		ALL CAUSES	DISEASE	INJURY	COLDS, INFLUENZA, ETC.,	PNEUMONIA (INCLUDING ATYPICAL)	DIARRHEA AND DYSENTERY	VENEREAL* (EXCLUDING EPTS)	MEASLES	MUMPS	SCARLET FEVER	M'GOCCIG MENINGITIS	RHEUMATIC FEVER	ATYPICAL PNEUMONIA	INFECTIOUS HEPATITIS	ALL CAUSES	DISEASE	INJURY	
THIRD SERVICE COMMAND	194127	670	647	23	196	11	5	76	2	16	3			19	16	3	2		697
Aberdeen Prov Grd, Md	14723	1212	1194	18?	668			35	1	13	1								3
George G Meade, Ft, Md (RH)	28235	873	871	2?	234	22	9?	79						5	1				13
Indiantown Gap, Pa	34412	588	577	11	51	12		80						8	1				41
Langley Field, Va (RH)	7138	306	299	7?	102			15?											3
Lee, Cp, Va (RH)	26846	556	539	17	141	25		91		3					2	1	1		31
Patrick Henry, Cp, Va	15480	427	417	10?	104	7?		104						2	10				9
TOTAL: ALL STATIONS UNDER 5000 STR & MISC UNITS	67293	649	602	47	203	5	10	75	1		2			4	2	2	1		597
MIL DIST OF WASHINGTON	55001	713	682	31	234	17	11	34	1	1			1	10	3	3	3		106
Belvoir, Ft, Va (RH)	18591	719	688	31	266	31		50		1				6	2				12
Myer, Ft, Va	6175	1044	1019	25?	362	17?		59						2					7
Washington Gen Disp, D C	9042	840	811	29?	414		6?												
TOTAL: ALL STATIONS UNDER 5000 STR & MISC UNITS	21193	557	523	34	93	12?	27	27	1				1	2	1	3	3		87

WEEKLY HEALTH REPORT

INDIVIDUAL STATIONS

RESTRICTED

SERVICE COMMAND AND STATION	MEAN STRENGTH**	A D M I S S I O N S														NUMBER OF DEATHS			NUMBER OF DISPOSITIONS BY CDD
		ANNUAL RATE PER 1000 STRENGTH			ANNUAL CASE RATE PER 1000 STRENGTH					NUMBER OF CASES						ALL CAUSES	DISEASE	INJURY	
		ALL CAUSES	DISEASE	INJURY	COLDS, INFLUENZA, ETC.,	PNEUMONIA (INCLUDING ATYPICAL)	DIAARRHEA AND DYSENTERY	VENEREAL* (EXCLUDING EPTS)	MEASLES	MUMPS	SCARLET FEVER	M'COCCIC MENINGITIS	RHEUMATIC FEVER	ATYPICAL PNEUMONIA	INFECTIOUS HEPATITIS				
FOURTH SERVICE COMMAND	502125	528	493	35	121	15	3	69	1	18	5	2	3	117	33	14	4	7	1165
Bemning, Ft, Ga (RH)	30274	504	483	21	79	7?	3?	64		5				3	3	1		1	22
Blanding, Cp, Fla (RH)	22629	480	393	87	78		9?	23								1		1	28
Boca Raton Field, Fla	6208	243	226	17?	25?		25?	34?											5
Bragg, Ft, N C (RH)	61591	516	492	24	168	15		70		1	1			10	2				22
Butner, Cp, N C Excl Gen & Conv Hosp	12136	647	587	60	69					1			2						
Croft, Cp, S C	9145	694	654	40	205	102	11?	63				1		16	1				3
Drew Field, Fla (RH)	20680	126	121	5?	30	3?		13?						1		1		1	2
Eglin Field, Fla (RH)	5090	327	327		61			61							1				12
Gordon, Cp, Ga	9349	996	979	17?	89	17?	6?	139							2	1		1	2
Gordon Johnston, Cp, Fla	6005	364	338	26?	113			43?											9
Greensboro AAFORD, N. C	31302	286	274	12	55	3?	3?			3			1	1					6
Jackson, Ft, S C (RH)	30097	579	558	21	67	2?	2?	164						1		1	1		4
Keesler Field, Miss (RH)	24518	702	647	55	390	70		11?		1	1	1		29	4				21
McClellan, Ft, Ala	31766	634	598	36	200	46	3?	57		5	1			26	2				46
MacDill Field, Fla	6565	444	396	48	95			71							3	1	1		2
Maxwell Field, Ala	8669	564	504	60		24?		102			1			4					
McPherson, Ft, Ga	20548	749	721	28	200	15	8?	106						6	1				6
Oglethorpe, Ft, Ga	8134	1279	1260	19?	237	6?	13?	217						1	2				59
Orlando AAFTC, Fla (RH)	6091	333	265	68			9?	26?							2				4
Seymour Johnson Field, N C	5758	452	443	9?	54			54								1		1	10

FORM SG-945 11 DEC. 1944

* DOES NOT INCLUDE READMITTED CASES (I.e. CASES PREVIOUSLY REPORTED BY AN ARMY UNIT)
** SEE NATURE OF THE DATA, PAGE 2.

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ARMY SERVICE FORCES
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HEALTH REPORTS BRANCH

WEEKLY HEALTH REPORT

INDIVIDUAL STATIONS

RESTRICTED

SERVICE COMMAND AND STATION	MEAN STRENGTH**	A D M I S S I O N S														NUMBER OF DEATHS			NUMBER OF DISPOSITIONS BY CDD
		ANNUAL RATE PER 1000 STRENGTH			ANNUAL CASE RATE PER 1000 STRENGTH					NUMBER OF CASES						ALL CAUSES	DISEASE	INJURY	
		ALL CAUSES	DISEASE	INJURY	COLDS INFLUENZA, ETC.	PNEUMONIA (INCLUDING ATYPICAL)	DYSENTERY AND DIARRHEA	* VENEREAL (EXCLUDING EPS)	MEASLES	MUMPS	SCARLET FEVER	M*COCCIG MENINGITIS	RHEUMATIO FEVER	ATYPICAL PNEUMONIA	INFECTIOUS HEPATITIS				
FIFTH SERVICE COMMAND	150634	688	658	30	204	8	3	67	1	2	1	1	2	18	8	3	1	2	573
Atterbury, Cp, Ind	33335	591	588	3?	97	3?		64					1		4				
Benj Harrison, Ft, Ind	5046	866	845	21?	474			21?			1								
Campbell, Cp, Ky	19112	811	765	46	354	5?	3?	98						2					8
Knox, Ft, Ky (RH)	33210	891	855	36	257	19	2?	86				1		12					11
Patterson Field, Ohio	5892	679	644	35?	459	9?		44?											16
Wright Field, Ohio	10198	474	454	20?	209		5?	31								2		2	
TOTAL: ALL STATIONS UNDER 5000 STR & MISC UNITS	43841	587	544	43	113	7	8	57	1	2			1	4	4	1	1		534
SIXTH SERVICE COMMAND	141616	664	643	21	187	10	3	53		7		1		14	24	4	2	2	440
Chamute Field, Ill (RH)	15475	464	430	34	165	27	3?	37				1		6	3				5
Grant, Cp, Ill	13775	1299	1284	15?	193			98							5				
McCoy, Cp, Wis	16308	839	826	13?	185	6?		48		2				1	1				13
Scott Field, Ill (RH)	11954	927	883	44	601	4?	17?	44		3				1					7
Sheridan, Ft, Ill (RH)	32947	595	587	8?	93	8?		38						2	4				26
Truax Field, Wis (RH)	8435	191	179	12?	62	6?													6
TOTAL: ALL STATIONS UNDER 5000 STR & MISC UNITS	42722	540	512	28	175	11	5?	72		2				4	11	4	2	2	383

FORM SG-945 11 DEC. 1944

* DOES NOT INCLUDE READMITTED CASES (i.e. CASES PREVIOUSLY REPORTED BY AN ARMY UNIT)
** SEE NATURE OF THE DATA, PAGE 2.

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ARMY SERVICE FORCES
OFFICE OF THE SURGEON GENERAL
MEDICAL STATISTICS DIVISION
HEALTH REPORTS BRANCH

WEEKLY HEALTH REPORT

INDIVIDUAL STATIONS

RESTRICTED

SERVICE COMMAND AND STATION	MEAN STRENGTH**	A D M I S S I O N S														NUMBER OF DEATHS			NUMBER OF DISPOSITIONS BY CDD
		ANNUAL RATE PER 1000 STRENGTH			ANNUAL CASE RATE PER 1000 STRENGTH					NUMBER OF CASES									
		ALL CAUSES	DISEASE	INJURY	COLDS, INFLUENZA, ETC.,	PNEUMONIA (INCLUDING ATYPICAL)	DIAHRHEA AND DYSENTERY	* VENEREAL (EXCLUDING EPTS)	MEASLES	MUMPS	SCARLET FEVER	M'COCCIC MENINGITIS	RHEUMATIC FEVER	ATYPICAL PNEUMONIA	INFECTIOUS HEPATITIS	ALL CAUSES	DISEASE	INJURY	
SEVENTH SERVICE COMMAND	231133	638	611	27	242	11	2	54	4	11	6	3	7	35	12	11	7	4	901
Buckley Field, Colo.	9151	512	506	6?	182	45		6?			1		1	8	1				24
Crowder, Cp., Mo. (RH)	29093	524	499	25	275	18	4?	45		1			1	10	2	2	1	1	26
F. E. Warren, Ft., Wyo. (RH)	8013	844	812	32?	136			162		1			4						30
Jefferson Bks., Mo.	13593	670	666	4?	46	23		96						1	5	1	1		2
Kearney AAF, Nebr.	5700	247	192	55	91	18?		9?			1								
Leavenworth, Ft., Kans.	18870	626	623	3?	110	14?	3?	66		1				5	1				5
Leonard Wood, Ft., Mo. (RH)	13523	915	865	50	315	4?		96		5	1	2		1		1		1	74
Lincoln AAF, Nebr. (RH) #	8648	373	337	36	156	12?		54						2					12
Logan, Ft., Colo.	6345	926	918	8?	197	8?					1			1					4
Lowry Field, Colo.	10745	915	891	24?	605		10?	53											4
Riley, Ft., Kans. (RH)	15131	519	485	34	151	10?		10?						3					16
Smoky Hill AAF, Kans.	5717	500	491	9?	218	9?		45?						1					8
Snelling, Ft., Minn.	8223	468	449	19?	177			51	4							1	1		
Topeka AAF, Kans.	5324	861	802	59	567			68								1	1		6
TOTAL: ALL STATIONS UNDER 5000 STR. & MISC. UNITS	73057	656	624	32	281	6	3?	51		3	2	1	1	3	3	5	3	2	690

WEEKLY HEALTH REPORT

INDIVIDUAL STATIONS

RESTRICTED

SERVICE COMMAND AND STATION	MEAN STRENGTH**	A D M I S S I O N S														NUMBER OF DEATHS			NUMBER OF DISPOSITIONS BY CDD
		ANNUAL RATE PER 1000 STRENGTH			ANNUAL CASE RATE PER 1000 STRENGTH				NUMBER OF CASES										
		ALL CAUSES	DISEASE	INJURY	COLDS INFLUENZA, ETC.,	PNEUMONIA (INCLUDING ATYPICAL)	DIPHTHERIA AND DYSENTERY	VENEREAL* (EXCLUDING EPS)	MEASLES	MUMPS	SCARLET FEVER	M'GOCCIC MENINGITIS	RHEUMATIC FEVER	ATYPICAL PNEUMONIA	INFECTIOUS HEPATITIS	ALL CAUSES	DISEASE	INJURY	
EIGHTH SERVICE COMMAND	421792	522	491	31	117	13	4	52	4	19	7	2	7	83	23	12	4	8	898
Amarillo AAF, Texas (RH)	7411	596	561	35?	253	14?	21?	28?			3			2		3		3	5
Bliss, Ft., Texas	18260	527	518	9?	194		14?	14?	1				1						
Bowie, Cp., Texas	10023	441	410	31	36	10?		52		1		1		1	2				8
Chaffee, Cp., Ark.	17714	634	602	32	208	32	9?	38		1				10	2				7
Claiborne, Cp., La.	7679	664	623	41	149			102		2			2			1		1	10
Ellington Field, Texas	6657	329	313	16?	55	8?		63						1		1	1		3
Fannin, Cp., Texas	8895	1064	1023	41	117	18?		123						1					4
Gruber, Cp., Okla.	6614	622	606	16?	110	31?	8?	71						4	6				6
Hood, Cp., Texas	20700	414	369	45	48	10?		13?	1	1				4		1		1	5
Jos. T. Robinson, Cp., Ark.	28459	721	641	80	166	44		20		2	1	1		22	1	1		1	44
Kelly Field, Texas	5131	263	243	20?	61		10?	81											4
New Orleans PoE, La.	17572	657	630	27	148	12?	6?	192	1	7				4					3
Polk, Cp., La.	6573	433	451	32?	32?			40?											9
Randolph Field, Texas	9341	262	256	6?	22?			56											2
Sam Houston, Ft., Texas	39388	442	438	4?	9			22											
San Antonio AAF, Texas (RH)	12177	397	397		60		4?	68					2						12
Sheppard Field, Texas (RH)	33255	711	683	28	278	25	5?	39		4	1			13					40
Sill, Ft., Okla.	17720	481	434	47	73	18		29	1					6		1		1	4
Swift, Cp., Texas	21726	448	438	10?	79	19		36						3	3	1		1	25

WEEKLY HEALTH REPORT

INDIVIDUAL STATIONS

RESTRICTED

SERVICE COMMAND AND STATION	MEAN STRENGTH**	A D M I S S I O N S													NUMBER OF DEATHS			NUMBER OF DISPOSITIONS BY CDD	
		ANNUAL RATE PER 1000 STRENGTH			ANNUAL CASE RATE PER 1000 STRENGTH					NUMBER OF CASES									
		ALL CAUSES	DISEASE	INJURY	COLDS, INFLUENZA, ETC.,	PNEUMONIA (INCLUDING ATYPICAL)	DIARRHEA AND DYSENTERY	VENEREAL* (EXCLUDING EPTS)	MEASLES	MUMPS	SCARLET FEVER	W*COCCIC MENINGITIS	RHEUMATIC FEVER	ATYPICAL PNEUMONIA	INFECTIOUS HEPATITIS	ALL CAUSES	DISEASE		INJURY
EIGHTH SERVICE COMMAND(cont'd)																			
Walters, Cp., Texas	8173	433	382	51	70	6?	6?	25?						1	1				3
TOTAL: ALL STATIONS UNDER 5000 STR. & MISC. UNITS	118324	460	423	37	116	9	5	64		1	2		2	11	8	3	3		704
NINTH SERVICE COMMAND	452974	531	497	34	115	9	5	38	6	11	1		5	53	30	17	6	11	775
Beale, Cp., Calif.	35405	726	717	9	78	7?	3?	68	1					4	2				20
Cooke, Cp., Calif.	17214	369	366	3?	42	30		36		1				2					10
Douglas, Ft., Utah	7380	1092	1057	35?	211			49											3
Geiger Field, Wash.	5024	393	362	31?	155	21?		10?						2					
Gowen Field, Idaho	5436	382	344	38?	115			48?											
Haan, Cp., Calif.	7681	331	257	74	27?		7?												4
Hamilton Field, Calif. (RH)	11763	292	274	18?	66	9?		27						1	1	1	1		4
Kearns AAFORD, Utah (RH)	11526	375	343	32	158	14?	14?	14?					1						1
Las Vegas AAF, Nev.	5086	368	358	10?	225	20?		20?						2		1		1	
Lawton, Ft., Wash.	18382	294	269	25	42	14?	3?	6?						5	8	2	2		2
Lewis, Ft., Wash.	34356	649	643	6?	260	5?	3?	58	4	3				3	5				
Los Angeles PoE, Calif.	13242	565	530	35	82	12?	16?	27						2					3
MacArthur, Ft., Calif.	16163	293	283	10?	84	6?		6?						2					6
March Field, Calif.	6175	564	522	42?	126		17?	25?											

FORM SG-945 11 DEC. 1944

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** SEE NATURE OF THE DATA, PAGE 2

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WEEKLY HEALTH REPORT

LIST OF STATIONS WITH HIGHEST MORBIDITY RATES

RESTRICTED

VOLUME V REPORT NO. 48
WEEK ENDING 30 November 1945

STATIONS WITH STRENGTH OF 5000 OR OVER

STATION	CURRENT WEEK	PREVIOUS WEEK	STATION	CURRENT WEEK	PREVIOUS WEEK	STATION	CURRENT WEEK	PREVIOUS WEEK
ALL CAUSES ANNUAL ADMISSION RATE PER 1000			DISEASE ANNUAL ADMISSION RATE PER 1000			INJURY ANNUAL ADMISSION RATE PER 1000		
Grant, Cp., Ill.	1299	948	Grant, Cp., Ill.	1284	905	Wheeler, Cp., Ga.	113	25 ?
Oglethorpe, Ft., Ga.	1279	904	Oglethorpe, Ft., Ga.	1260	869	Blanding, Cp., Fla.	87	44
Aberdeen Prov. Grd., Md.	1212	903	Aberdeen Prov. Grd., Md.	1194	852	Jos. T. Robinson, Cp., Ark.	80	55
Douglas, Ft., Utah ^{(1) (2)}	1092	961	Douglas, Ft., Utah ^{(1) (2)}	1057	848	Haan, Cp., Calif.	74	62
Fannin, Cp., Tex.	1064	616	Fannin, Cp., Tex.	1023	575	Orlando AAFTC, Fla.	68	74
Myer, Ft., Va.	1044	788	Myer, Ft., Va.	1019	739	Butner, Cp., N. C. Excl. Gen. & Conv. Hosp.	60	30
Shelby, Cp., Miss. ^{(1) (2)}	1024	849	Shelby, Cp., Miss. ^{(1) (2)}	997	835	Maxwell Field, Ala.	60	20 ?
COLDS, INFLUENZA, ETC.* ANNUAL ADMISSION RATE PER 1000			PNEUMONIA (INCLUDING ATYPICAL) ANNUAL ADMISSION RATE PER 1000			DIARRHEA AND DYSENTERY ANNUAL ADMISSION RATE PER 1000		
Aberdeen Prov. Grd., Md.	668	530	Croft, Cp., S. C.	102	15 ?	Ord, Ft., Calif.	23	12
Lowry Field, Colo.	605	560	Keesler Field, Miss.	70	84			
Scott Field, Ill.	601	236	McClellan, Ft., Ala.	46	23			
Topeka AAF, Kans.	567	107	Buckley Field, Colo.	45	26 ?			
Benj. Harrison, Ft., Ind.	474	412	Jos. T. Robinson, Cp., Ark.	44	29	No other station with		
Patterson Field, Ohio	459	270	Chaffee, Cp., Ark.	32	16 ?	six or more cases.		
Wash. Gen. Disp., D. C.	414	184	Belvoir, Ft., Va.	31	16			
VENEREAL (EXCLUDING EPTI) ANNUAL ADMISSION RATE PER 1000			DISEASE EXCLUDING VENEREAL EPTS ANNUAL ADMISSION RATE PER 1000			(1) Reception Center or Station: See Nature of the Data (2) Separation Center See Nature of the Data Note: When the current week's data for a station have not been received and the previous week's data are used instead, the rates for this station are not reported in this table if they were so shown in last week's report.		
Oglethorpe, Ft., Ga.	217	163	Grant, Cp., Ill.	1284	905			
Shelby, Cp., Miss.	194	165	Oglethorpe, Ft., Ga.	1247	869			
New Orleans POE, La.	192	202	Aberdeen Prov. Grd., Md.	1190	852			
Jackson, Ft., S. C.	164	229	Douglas, Ft., Utah ^{(1) (2)}	1057	848			
F. E. Warren, Ft., Wyo.	162	134	Fannin, Cp., Tex.	1023	575			
Gordon, Cp., Ga.	139	107	Myer, Ft., Va.	1019	739			
Kilmer, Cp., N. J.	135	103	Shelby, Cp., Miss. ^{(1) (2)}	997	833			

FORM SG-396E, 12 NOVEMBER 1943

*Includes Acute Bronchitis, Acute Rhinitis, Coryza, Acute Tonsillitis, Acute Pharyngitis, Acute Nasopharyngitis, Acute Laryngitis, And Influenza.

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LIST OF CASES OF DISEASES WHICH ARE OF SPECIAL INTEREST

FORM SG-902 - 8 July 1944

ARMY SERVICE FORCES
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MORBIDITY AND MORTALITY, 1819-1944

The charts on the following pages are based on the most valid data concerning morbidity and mortality in the U. S. Army currently available in the Office of The Surgeon General. Reasonably complete and accurate morbidity and mortality records of the United States Army were first collected during 1819. With the exception of the years, 1833, 1834, and 1836 for which no data are available, the records for the United States Army form the longest consecutive series of annual health records in this country. Morbidity and mortality data during the periods of the Mexican War, 1847 and 1848 and the Civil War, 1862-1866 are incomplete and are not shown on the charts presenting rates by calendar years. Annual mortality rates for the civilian population were first collected on a national basis in 1900. Even though Army troops form a small selected group of the total population of the country, the general trend in morbidity and mortality rates undoubtedly reflects the changes which have taken place in the health of the entire population.

Trend in Admissions to Sick Report, 1819 - 1944

During the century and a quarter which has elapsed since 1819, the annual admission rate to sick report has decreased about 75 percent so that today it is only one fourth as high as it was during the 1820's. Just prior to the outbreak of World War II about 6 or 7 out of every 10 soldiers were excused from duty for one day or longer due to ill health; in the early years of the past century each soldier, on the average, was excused from duty from 2 to 3 times each year for similar reasons.

The highest admission rates were recorded just before and after the War with Mexico, the largest

being 3847 per 1000 per annum in 1841 due, in part at least, to the campaign against the Indians in Florida. Little or no improvement occurred in the health of the Army until after the Civil War. Malaria, typhoid fever, diarrhea and dysentery, cholera, smallpox and other communicable diseases were the principal causes of non-effectiveness. Improvements in sanitation and hygiene and in the control of infectious and parasitic diseases started a decline in the admission rate from disease shortly after the Civil War which has continued since that time except during the Spanish American War and World Wars I and II.

Prior to World War I colored troops were excused from duty due to ill health in approximately the same relative numbers as white troops. However, during the period between World Wars I and II the admission rates from both disease and injury for colored troops were definitely less than those for white troops, reflecting largely differences in assignment and geographic distribution. Mobilization of new troops before and during World War II resulted in a sharp rise in the illness rates of both white and colored men; the rates among colored troops increased more rapidly, partly as a result of the greater prevalence of venereal disease, so that their more favorable health experience had vanished by the end of 1941.

Trend in Non-Effectives, 1867 - 1944

The decline in the admission rate during the past century and a quarter has produced a corresponding decline in the average daily number of non-effectives. At the close of the Civil War when the first data on non-effectiveness in the Army are available, between 5 and 6 percent of the troops were constantly non-effective as a result of disease or injury. By 1940,

MORBIDITY AND MORTALITY, 1819-1944 (CONT'D)

when mobilization for World War II began, this figure had dropped to about 3 percent. During World War II the rate rose again but did not reach the level of either World War I or the Spanish War in spite of the global distribution of troops. The relatively small increase in this war contrasts graphically with the experience during the Spanish War and the Philippine Insurrection when American troops were first exposed to tropical diseases. At that time the non-effective rate jumped from about 3.5 percent to nearly 8.5 percent. Fifteen years passed before the rate again fell to pre-war levels.

Prior to World War I colored and white troops experienced approximately the same non-effective rates. After World War I, following the decline in admission rates, the non-effective rate of colored troops remained well below that of white troops. However, this difference was reversed during World War II.

Trend in Death Rates, 1819 - 1944

Even more spectacular than the decrease in the amount of illness among Army troops has been the decrease in the death rate. Up until the Civil War the death rate from disease fluctuated widely depending upon the presence or absence of epidemics of communicable diseases. The highest rate, 80 per 1000 per annum, or 8 percent of the troops was recorded in 1849. This rate is more than 130 times that prevailing during World War II. The most impressive medical development of World War II was the prevention of death from disease. Contrary to the experience of previous wars, the death rate from disease actually decreased during the war just ended. Mobilization of an army of 8,000,000 men and deployment throughout the entire world occurred simultaneously with a

decrease in the death rate from disease from 2.0 to 2.5 per 1000 per annum prior to the war to a rate of only 0.6 per 1000 during the war. At present, the death rate from disease in the Army is only about one fourth the corresponding death rate among males of the same ages in the civilian population.

The death rate from non-battle injury which declined more than 50 percent between the end of the Civil War and World War I showed no definite trend after 1920 until the outbreak of World War II. The increasing mechanization of the Army especially the increase in the use of airplanes has tended to maintain the death rate from injury at a level of about 2.0 per 1000 per annum.

Contrary to the case with respect to admission and non-effective rates, the death rate from disease generally has been higher among colored than among white troops. The death rate from non-battle injury among colored troops fluctuates widely due to the relatively small number of men involved but has been consistently below the rate for white troops since World War I due largely to assignment to less hazardous jobs.

Wounds and Deaths in Major Wars

The impressive advances which have been made in military medicine during recent years is graphically demonstrated by the fact that World War II was the first major war in which this country has participated that deaths from battle causes have exceeded deaths from disease. It might be thought that the larger number of battle deaths result from more intensive combat with more deadly weapons than were available during past wars. But this is not the case. The number of battle deaths per annum per 1000 troops in service was less than 60 percent of that during World

MORBIDITY AND MORTALITY 1819-1944 (CONT'D)

War I and only 25 percent of the corresponding number among northern troops during the Civil War.

During World War II, 13 men died in battle for every man who died from disease; during the Spanish-American War the ratio was reversed, 13 men dying from disease for every man dying in battle. Without the effective control which the Medical Department exercised over disease, it is almost certain that World War II could not have been brought to a victorious end at the time when it actually was. During the Civil War 71 men per 1000 troops died from disease each year. If the same rate had prevailed during World War II, the Army would have lost more than 1,600,000 men from deaths due to disease instead of the actual number, 13,700. Obviously, losses of this magnitude would have seriously impaired the successful prosecution of the war.

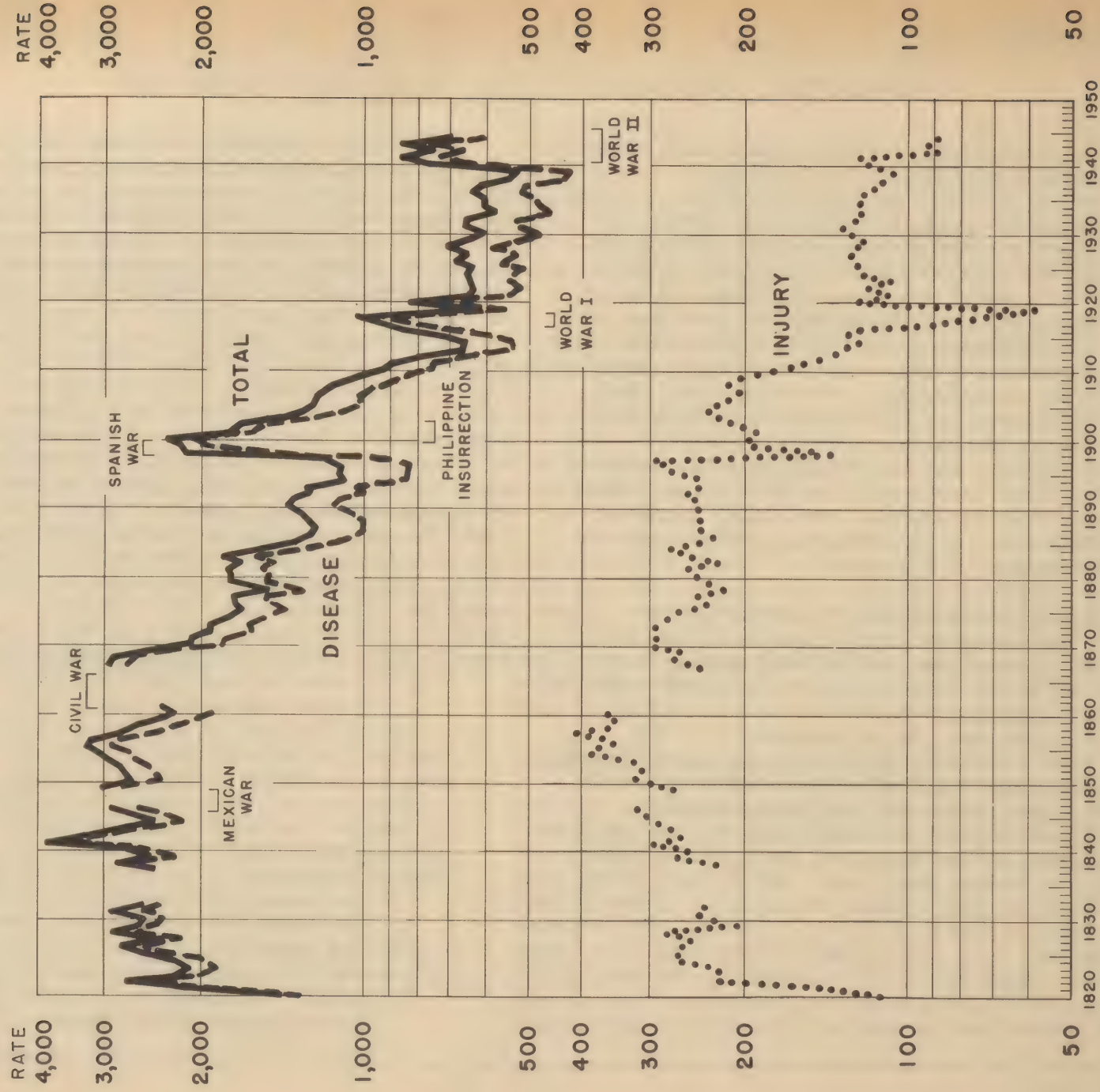
In spite of the fact that World War II was a global war and that the number of men mobilized was several times larger than during any previous war, the number of deaths from all causes fell well below the number of deaths during the Civil War. While records are incomplete, it is estimated that the Civil War cost about 620,000 lives among the northern and southern forces combined. The combined losses due to death among both Army and Navy personnel during World War II did not exceed 375,000 persons or about 60 percent of the number of deaths during the Civil War.

Although the control of disease was the most important factor in the prevention of death during World War II, the increase in the proportion of the wounded who recover should not be forgotten. An exact comparison of the case fatality rate among wounded personnel cannot be made due to varying practices in counting the number of wounded and the number which died of wounds as well as differences in the accuracy and completeness of the statistical information. Nevertheless, the reported case fatality rates probably reflect the relative rank of the various wars with respect to the percentage of wounded who subsequently die as a result of their wounds. The percentage of the wounded who died of wounds has been as follows, Civil War, about 14 percent; World War I including gas casualties, 6.1 percent or 8.3 percent if only gunshot wounds are included; and World War II, about 4.4 percent. These figures are case fatality rates and consequently differ from those shown in the table since the latter are annual death rates per 1000 strength. The reduction in the case fatality rate during World War II saved the lives of from 20,000 to 25,000 wounded personnel.

ADMISSIONS TO SICK REPORT—DISEASE, INJURY, AND TOTAL

1819 — 1944

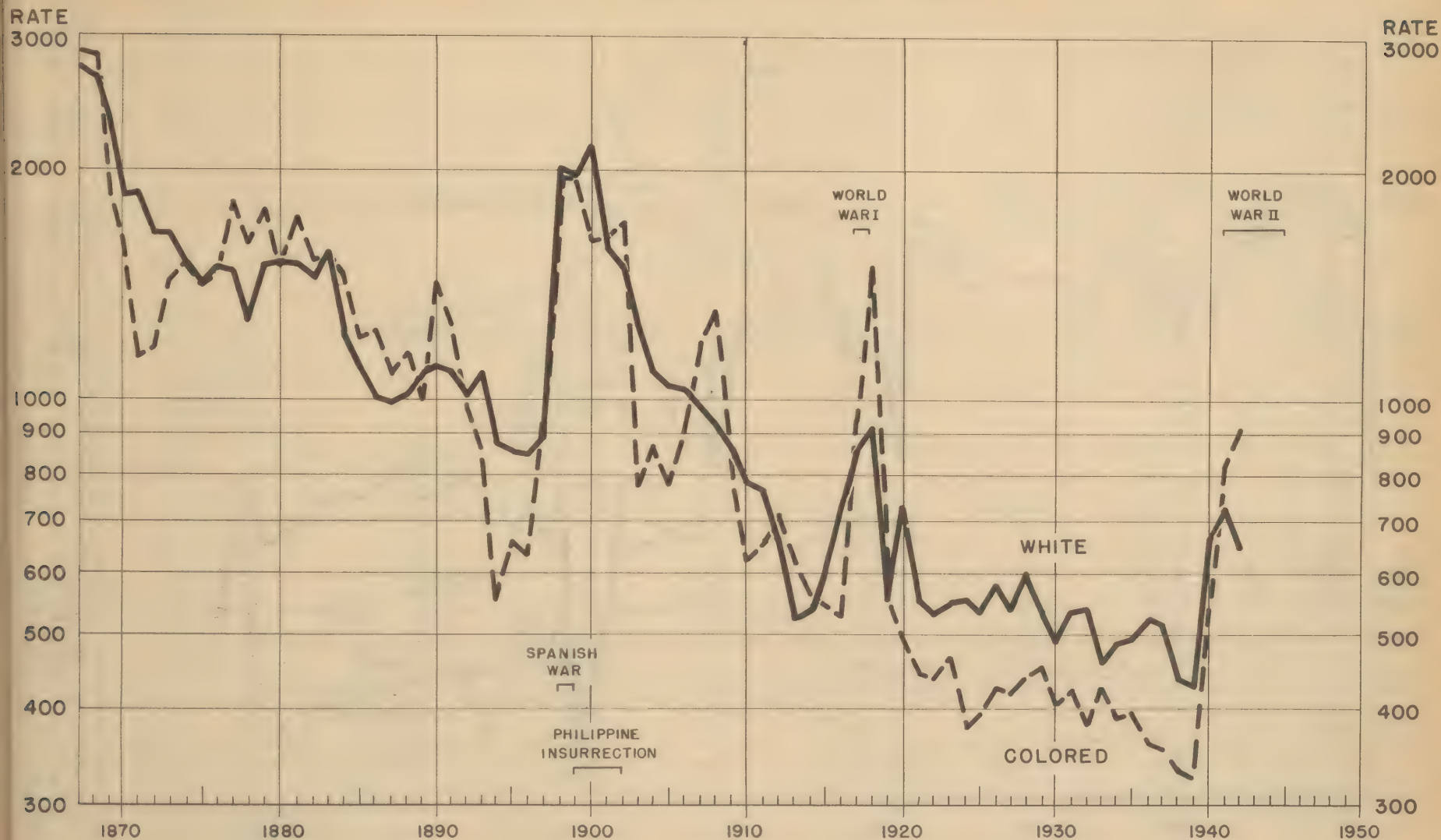
ADMISSIONS PER 1,000 TROOPS PER YEAR



BATTLE CASUALTIES NOT INCLUDED IN WORLD WAR I & II. PUERTO RICAN AND FILIPINO TROOPS NOT INCLUDED IN YEAR 1904 THROUGH 1910. NO RECORDS AVAILABLE FOR 1833—1836, INCLUSIVE; 1861—1866 INCLUSIVE. RELIABLE DATA IS NOT AVAILABLE FOR THE MEXICAN WAR PERIOD (1847—1848). FISCAL YEAR ENDING 30 JUNE FOR PERIOD 1867—1882, INCLUSIVE.

DISEASE ADMISSIONS — WHITE AND COLORED TROOPS, 1867 - 1942

ADMISSIONS PER 1000 TROOPS PER YEAR



FISCAL YEAR ENDING 30 JUNE FOR PERIOD 1867 - 1882, INCLUSIVE.

PUERTO RICAN AND FILIPINO TROOPS NOT INCLUDED IN YEARS 1904 THROUGH 1910.

INJURY ADMISSIONS — WHITE AND COLORED TROOPS, 1862 - 1942

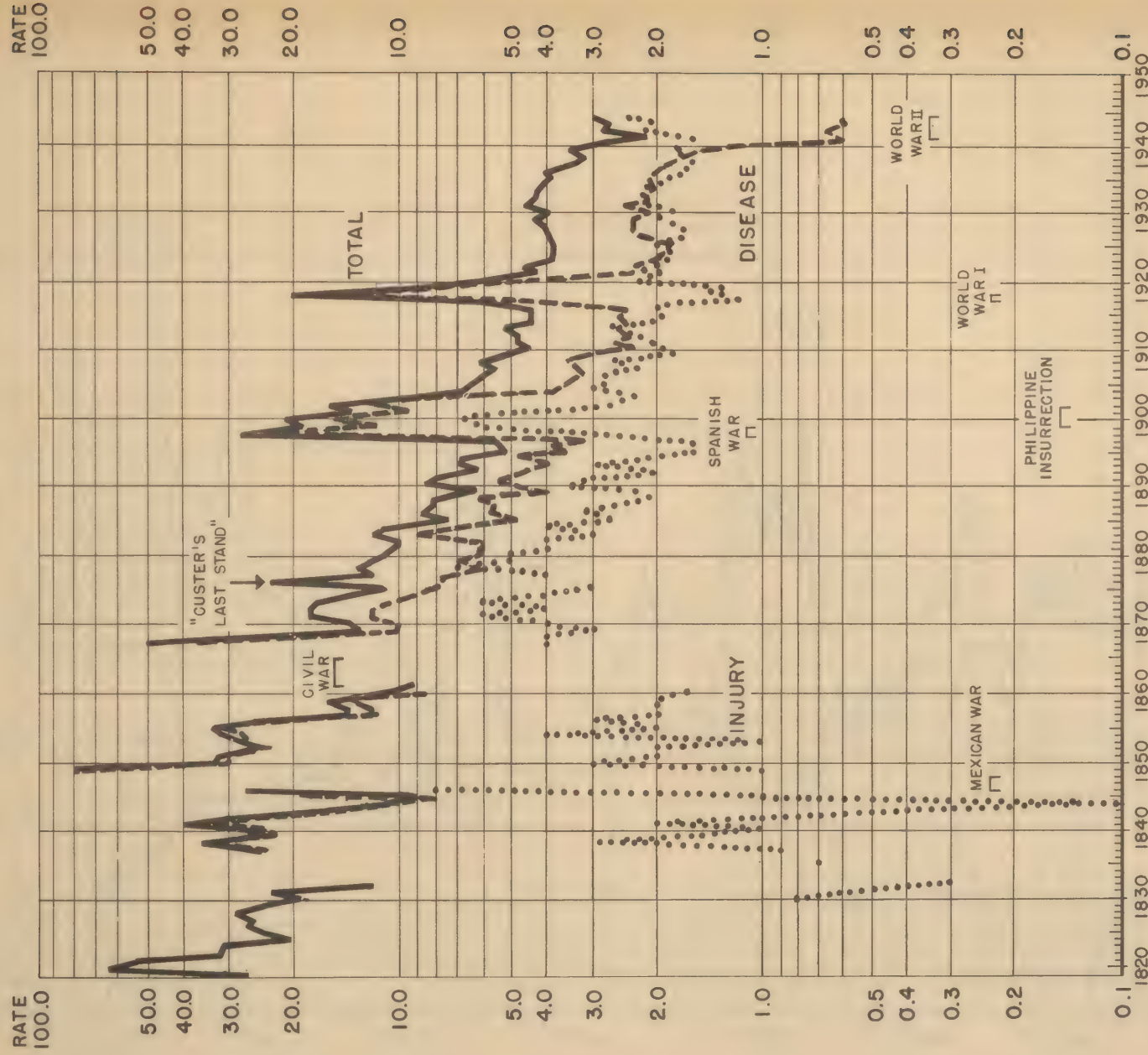
ADMISSIONS PER 1000 TROOPS PER YEAR



FISCAL YEAR ENDING 30 JUNE FOR PERIOD ENDING 1867-1882, INCLUSIVE.
 PUERTO RICAN AND FILIPINO TROOPS NOT INCLUDED IN YEARS 1904 THROUGH 1910.
 BATTLE CASUALTIES NOT INCLUDED IN WORLD WARS I AND II.

DEATHS - DISEASE, INJURY, AND TOTAL, 1819 - 1944

DEATHS PER 1000 TROOPS PER YEAR



INCLUDES KILLED IN ACTION AND DIED OF WOUNDS AS FOLLOWS:

YEAR	RATE	YEAR	RATE
1898	1.7	1900	4.2
1899	4.6	1901	1.5

PUERTO RICAN AND FILIPINO TROOPS NOT INCLUDED IN YEARS 1904 THROUGH 1910.

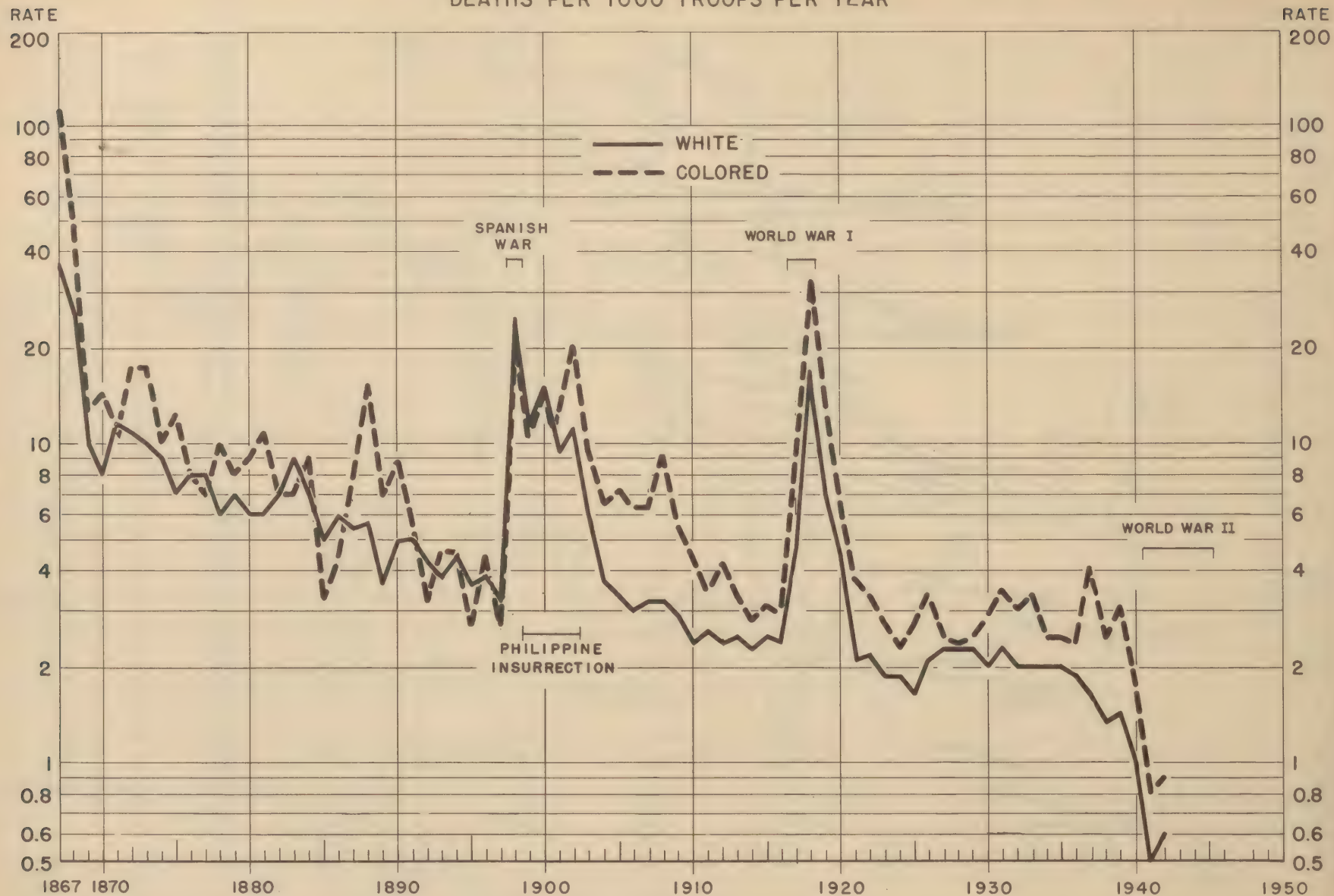
NO RECORD AVAILABLE FOR 1833 - 1836, INCLUSIVE, 1861 - 1866 INCLUSIVE. RELIABLE DATA IS NOT AVAILABLE FOR THE MEXICAN WAR PERIOD, 1847 - 1848.

FISCAL YEAR ENDING 30 JUNE FOR PERIOD 1867 - 1882, INCLUSIVE.

BATTLE CASUALTIES NOT INCLUDED IN WORLD WARS I AND II.

DEATHS FROM DISEASE-WHITE AND COLORED, TROOPS, 1867-1942

DEATHS PER 1000 TROOPS PER YEAR

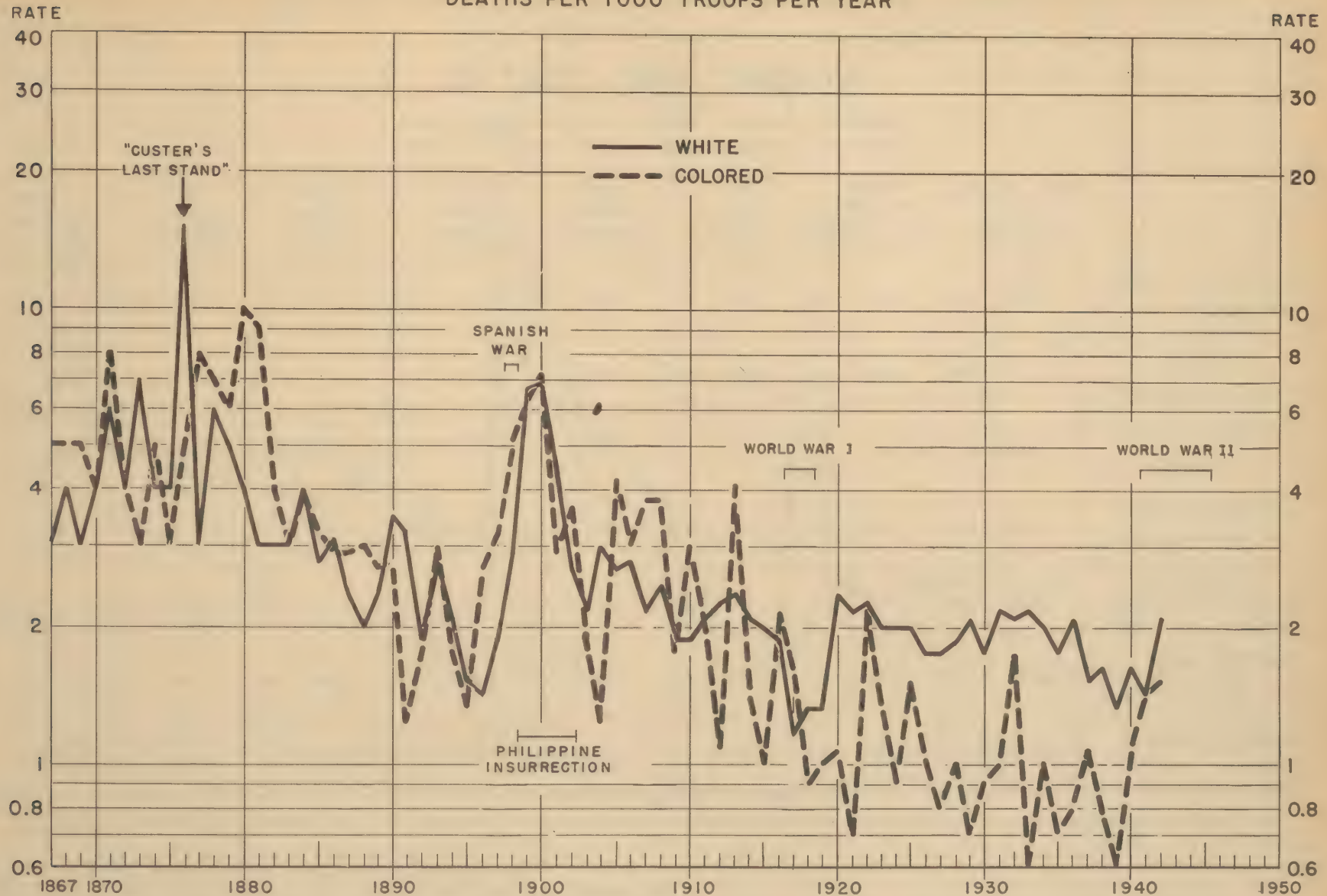


FISCAL YEAR ENDING 30 JUNE FOR PERIOD 1867-1882, INCLUSIVE.

PUERTO RICAN AND FILIPINO TROOPS NOT INCLUDED IN YEARS 1904 THROUGH 1910.

DEATHS FROM INJURY—WHITE AND COLORED TROOPS, 1867-1942

DEATHS PER 1000 TROOPS PER YEAR



FISCAL YEAR ENDING 30 JUNE FOR PERIOD 1867-1882, INCLUSIVE. PUERTO RICAN AND FILIPINO TROOPS NOT INCLUDED IN YEARS 1904 THROUGH 1910. BATTLE CASUALTIES NOT INCLUDED IN WORLD WARS I AND II.

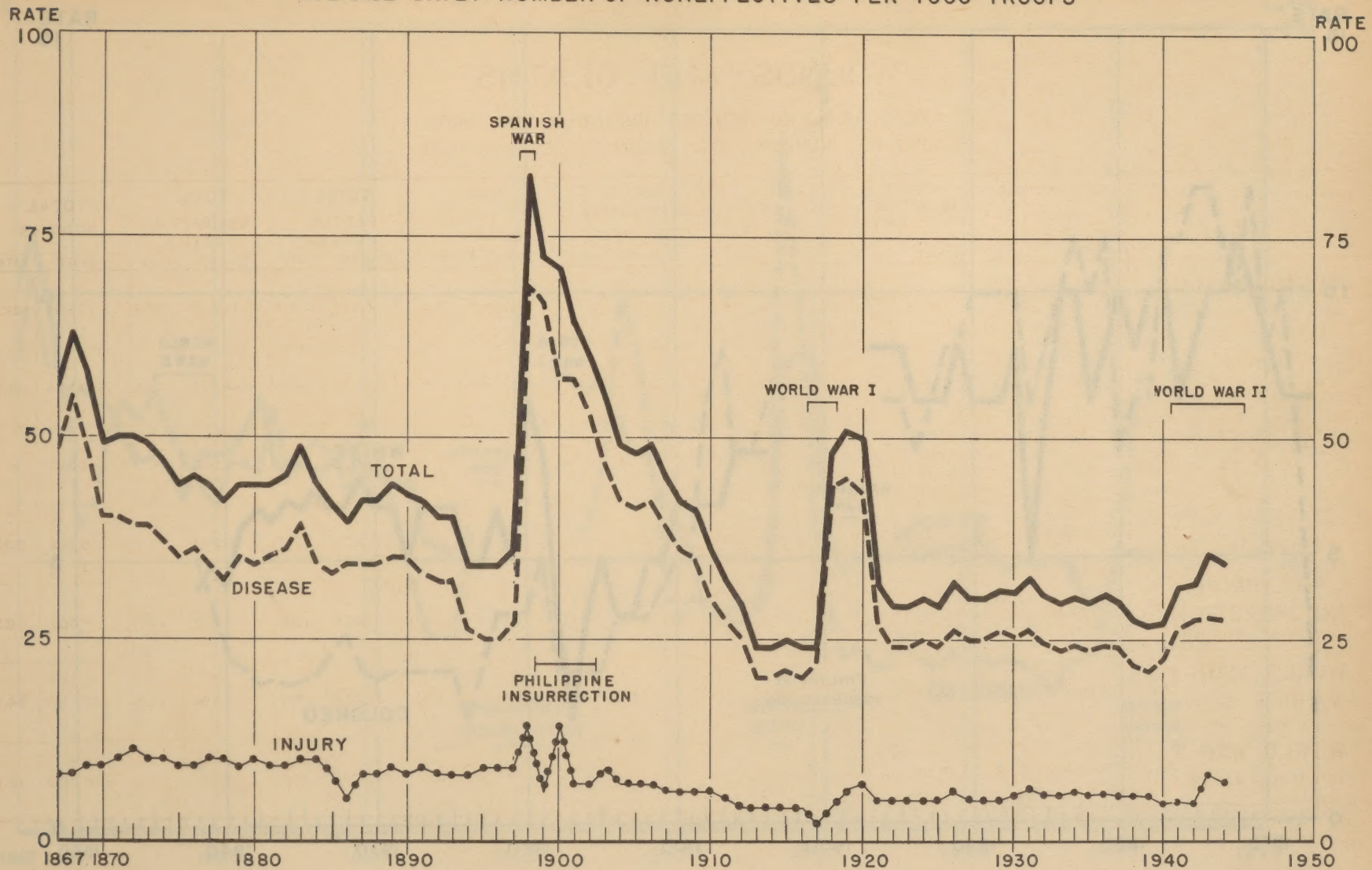
WOUNDS AND DEATHS

AMERICAN LAND FORCES DURING MAJOR WARS
ABSOLUTE NUMBERS AND ANNUAL RATES PER 1000

	TOTAL WOUNDED INCLUDES DIED OF WOUNDS		KILLED IN ACTION INCLUDES DEATHS WHILE PRISONERS		DIED OF WOUNDS		DIED OF NON-BATTLE INJURIES		DIED FROM DISEASE		TOTAL BATTLE DEATHS		TOTAL NON-BATTLE DEATHS		TOTAL DEATHS	
	NUMBER	RATE	NUMBER	RATE	NUMBER	RATE	NUMBER	RATE	NUMBER	RATE	NUMBER	RATE	NUMBER	RATE	NUMBER	RATE
MEXICAN WAR APR. 1846 — FEB. 1848	3,420	32.4	1,049	9.9	508	4.8	395	3.7	10,982	103.9	1,557	14.7	11,377	107.6	12,934	122.3
NORTH CIVIL WAR APR. 1861 — APR. 1865	318,187	96.6	69,982	21.3	44,775	13.6	10,982	3.4	233,789	71.2	114,757	34.9	244,771	74.6	359,528	101.5
SOUTH	INCOMPLETE DATA -----										95,000	*	165,000	*	260,000	*
SPANISH WAR MAY 1898 — DEC. 1898	1,604	12.0	272	1.9	107	0.8	288	2.0	4,795	34.0	379	2.7	5,083	36.0	5,462	38.7
PHILIPPINE INSURRECTION JAN. 1899 — DEC. 1902	3,083	8.1	823	2.2	241	0.6	1,063	2.8	4,874	12.9	1,064	2.8	5,937	15.7	7,001	18.5
WORLD WAR I APR. 1917 — DEC. 1918	224,089	72.0	37,568	12.0	13,691	4.4	4,421	1.4	51,447	6.5	51,259	16.4	55,868	17.9	107,127	34.3
WORLD WAR II DEC. 1941 — AUG. 1945	598,000	25.4	190,500	8.1	26,500	1.1	54,300	2.3	13,700	0.6	217,000	9.2	68,000	2.9	285,000	12.1

NONEFFECTIVES—DISEASE, INJURY, AND TOTAL, 1867-1944

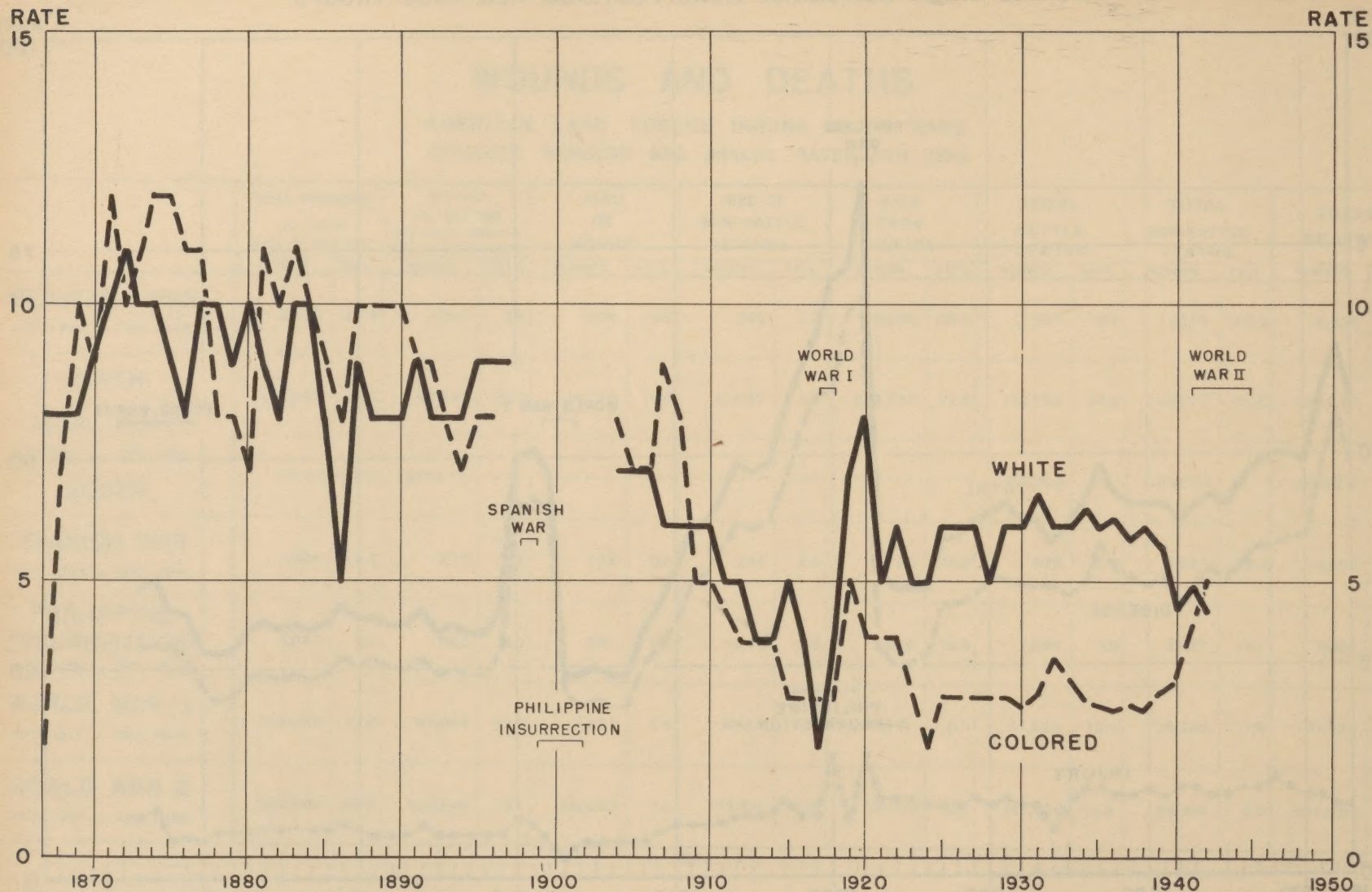
AVERAGE DAILY NUMBER OF NONEFFECTIVES PER 1000 TROOPS



FISCAL YEAR ENDING 30 JUNE FOR PERIOD 1867-1882, INCLUSIVE.
 PUERTO RICAN AND FILIPINO TROOPS NOT INCLUDED IN YEARS 1904 THROUGH 1910
 BATTLE CASUALTIES NOT INCLUDED IN WORLD WARS I AND II.

NONEFFECTIVES FROM INJURY—WHITE AND COLORED TROOPS, 1867-1942

AVERAGE DAILY NUMBER OF NONEFFECTIVES PER 1000 TROOPS



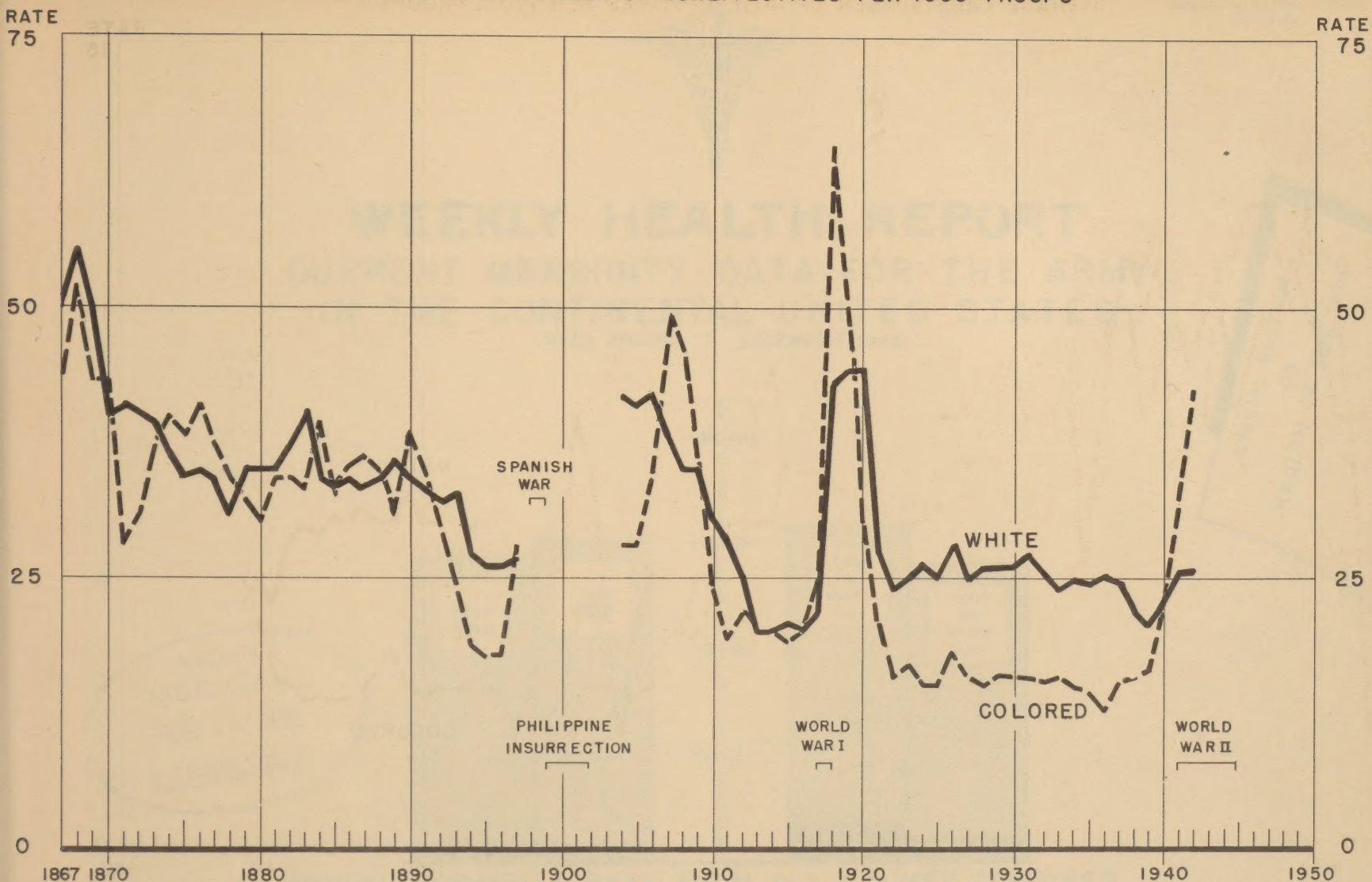
FISCAL YEAR ENDING 30 JUNE FOR PERIOD 1867-1882, INCLUSIVE.

PUERTO RICAN AND FILIPINO TROOPS NOT INCLUDED IN YEARS 1904 THROUGH 1910.

DATA NOT AVAILABLE FOR PERIOD 1898 THROUGH 1903.

NONEFFECTIVES FROM DISEASE—WHITE AND COLORED TROOPS, 1867-1942

AVERAGE DAILY NUMBER OF NONEFFECTIVES PER 1000 TROOPS



FISCAL YEAR ENDING 30 JUNE FOR PERIOD 1867-1882, INCLUSIVE.

PUERTO RICAN AND FILIPINO TROOPS NOT INCLUDED IN YEARS 1904 THROUGH 1910.

DATA NOT AVAILABLE FOR PERIOD 1898 THROUGH 1903.

